



# House of Representatives

General Assembly

**File No. 473**

*February Session, 2014*

Substitute House Bill No. 5521

*House of Representatives, April 9, 2014*

The Committee on Education reported through REP. FLEISCHMANN of the 18th Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

## ***AN ACT CONCERNING THE STORAGE AND ADMINISTRATION OF EPINEPHRINE AT PUBLIC SCHOOLS.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 10-212a of the 2014 supplement to the general  
2 statutes is repealed and the following is substituted in lieu thereof  
3 (*Effective July 1, 2014*):

4 [(a) (1) A school nurse or, in the absence of such nurse, any other  
5 nurse licensed pursuant to the provisions of chapter 378, including a  
6 nurse employed by, or providing services under the direction of a local  
7 or regional board of education at, a school-based health clinic, who  
8 shall administer medical preparations only to students enrolled in such  
9 school-based health clinic in the absence of a school nurse, the  
10 principal, any teacher, licensed athletic trainer, licensed physical or  
11 occupational therapist employed by a school district, or coach of  
12 intramural and interscholastic athletics of a school may administer,  
13 subject to the provisions of subdivision (2) of this subsection,

14 medicinal preparations, including such controlled drugs as the  
15 Commissioner of Consumer Protection may, by regulation, designate,  
16 to any student at such school pursuant to the written order of a  
17 physician licensed to practice medicine, or a dentist licensed to practice  
18 dental medicine in this or another state, or an optometrist licensed to  
19 practice optometry in this state under chapter 380, or an advanced  
20 practice registered nurse licensed to prescribe in accordance with  
21 section 20-94a, or a physician assistant licensed to prescribe in  
22 accordance with section 20-12d, and the written authorization of a  
23 parent or guardian of such child. The administration of medicinal  
24 preparations by a nurse licensed pursuant to the provisions of chapter  
25 378, a principal, teacher, licensed athletic trainer, licensed physical or  
26 occupational therapist employed by a school district, or coach shall be  
27 under the general supervision of a school nurse. No such school nurse  
28 or other nurse, principal, teacher, licensed athletic trainer, licensed  
29 physical or occupational therapist employed by a school district, coach  
30 or school paraprofessional administering medication pursuant to  
31 subsections (d) and (e) of this section shall be liable to such student or  
32 a parent or guardian of such student for civil damages for any personal  
33 injuries that result from acts or omissions of such school nurse or other  
34 nurse, principal, teacher, licensed athletic trainer, licensed physical or  
35 occupational therapist employed by a school district, coach or school  
36 paraprofessional administering medication pursuant to subsections (d)  
37 and (e) of this section in administering such preparations that may  
38 constitute ordinary negligence. This immunity does not apply to acts  
39 or omissions constituting gross, wilful or wanton negligence.

40 (2) Each local and regional board of education that allows a school  
41 nurse or, in the absence of such nurse, any other nurse licensed  
42 pursuant to the provisions of chapter 378, including a nurse employed  
43 by, or providing services under the direction of a local or regional  
44 board of education at, a school-based health clinic, who shall  
45 administer medical preparations only to students enrolled in such  
46 school-based health clinic in the absence of a school nurse, the  
47 principal, any teacher, licensed athletic trainer, licensed physical or  
48 occupational therapist employed by a school district, or coach of

49 intramural and interscholastic athletics of a school to administer  
50 medicine or that allows a student to self-administer medicine,  
51 including medicine administered through the use of an asthmatic  
52 inhaler or an automatic prefilled cartridge injector or similar automatic  
53 injectable equipment, shall adopt written policies and procedures, in  
54 accordance with this section and the regulations adopted pursuant to  
55 subsection (c) of this section, that shall be approved by the school  
56 medical advisor or other qualified licensed physician. Once so  
57 approved, such administration of medication shall be in accordance  
58 with such policies and procedures.

59 (3) A director of a school readiness program as defined in section  
60 10-16p or a before or after school program exempt from licensure by  
61 the Department of Public Health pursuant to subdivision (1) of  
62 subsection (b) of section 19a-77, or the director's designee, may  
63 administer medications to a child enrolled in such a program in  
64 accordance with regulations adopted by the State Board of Education  
65 in accordance with the provisions of chapter 54. No individual  
66 administering medications pursuant to this subdivision shall be liable  
67 to such child or a parent or guardian of such child for civil damages for  
68 any personal injuries that result from acts or omissions of such  
69 individual in administering such medications which may constitute  
70 ordinary negligence. This immunity shall not apply to acts or  
71 omissions constituting gross, wilful or wanton negligence.

72 (b) Each school wherein any controlled drug is administered under  
73 the provisions of this section shall keep such records thereof as are  
74 required of hospitals under the provisions of subsections (f) and (h) of  
75 section 21a-254 and shall store such drug in such manner as the  
76 Commissioner of Consumer Protection shall, by regulation, require.

77 (c) The State Board of Education, in consultation with the  
78 Commissioner of Public Health, shall adopt regulations, in accordance  
79 with the provisions of chapter 54, determined to be necessary by the  
80 board to carry out the provisions of this section, including, but not  
81 limited to, regulations that (1) specify conditions under which a coach

82 of intramural and interscholastic athletics may administer medicinal  
83 preparations, including controlled drugs specified in the regulations  
84 adopted by the commissioner, to a child participating in such  
85 intramural and interscholastic athletics, (2) specify conditions and  
86 procedures for the administration of medication by school personnel to  
87 students, and (3) specify conditions for self-administration of  
88 medication by students, including permitting a child diagnosed with:  
89 (A) Asthma to retain possession of an asthmatic inhaler at all times  
90 while attending school for prompt treatment of the child's asthma and  
91 to protect the child against serious harm or death provided a written  
92 authorization for self-administration of medication signed by the  
93 child's parent or guardian and an authorized prescriber is submitted to  
94 the school nurse; and (B) an allergic condition to retain possession of  
95 an automatic prefilled cartridge injector or similar automatic injectable  
96 equipment at all times while attending school for prompt treatment of  
97 the child's allergic condition and to protect the child against serious  
98 harm or death provided a written authorization for self-administration  
99 of medication signed by the child's parent or guardian and an  
100 authorized prescriber is submitted to the school nurse. The regulations  
101 shall require authorization pursuant to: (i) The written order of a  
102 physician licensed to practice medicine in this or another state, a  
103 dentist licensed to practice dental medicine in this or another state, an  
104 advanced practice registered nurse licensed under chapter 378, a  
105 physician assistant licensed under chapter 370, a podiatrist licensed  
106 under chapter 375, or an optometrist licensed under chapter 380; and  
107 (ii) the written authorization of a parent or guardian of such child.

108 (d) (1) With the written authorization of a student's parent or  
109 guardian, and (2) pursuant to the written order of (A) a physician  
110 licensed under chapter 370, (B) an optometrist licensed to practice  
111 optometry under chapter 380, (C) an advanced practice registered  
112 nurse licensed to prescribe in accordance with section 20-94a, or (D) a  
113 physician assistant licensed to prescribe in accordance with section 20-  
114 12d, a school nurse and a school medical advisor may jointly approve  
115 and provide general supervision to an identified school  
116 paraprofessional to administer medication, including, but not limited

117 to, medication administered with a cartridge injector, to a specific  
118 student with a medically diagnosed allergic condition that may require  
119 prompt treatment in order to protect the student against serious harm  
120 or death. For purposes of this subsection, "cartridge injector" means an  
121 automatic prefilled cartridge injector or similar automatic injectable  
122 equipment used to deliver epinephrine in a standard dose for  
123 emergency first aid response to allergic reactions.

124 (e) (1) With the written authorization of a student's parent or  
125 guardian, and (2) pursuant to a written order of the student's physician  
126 licensed under chapter 370, a school nurse or a school principal shall  
127 select, and a school nurse shall provide general supervision to, a  
128 qualified school employee to administer medication with injectable  
129 equipment used to administer glucagon to a student with diabetes that  
130 may require prompt treatment in order to protect the student against  
131 serious harm or death. Such authorization shall be limited to situations  
132 when the school nurse is absent or unavailable. No qualified school  
133 employee shall administer medication under this subsection unless (A)  
134 such qualified school employee annually completes any training  
135 required by the school nurse and school medical advisor in the  
136 administration of medication with injectable equipment used to  
137 administer glucagon, (B) the school nurse and school medical advisor  
138 have attested, in writing, that such qualified school employee has  
139 completed such training, and (C) such qualified school employee  
140 voluntarily agrees to serve as a qualified school employee. For  
141 purposes of this subsection, "injectable equipment used to administer  
142 glucagon" means an injector or injectable equipment used to deliver  
143 glucagon in an appropriate dose for emergency first aid response to  
144 diabetes. For purposes of this subsection, "qualified school employee"  
145 means a principal, teacher, licensed athletic trainer, licensed physical  
146 or occupational therapist employed by a school district, coach or  
147 school paraprofessional.]

148 (a) As used in this section and section 2 of this act:

149 (1) "Qualified school professional" means a nurse licensed pursuant

150 to the provisions of chapter 378, principal, teacher, licensed athletic  
151 trainer, licensed physical or occupational therapist employed by a  
152 school district, coach of intramural or interscholastic athletics of a  
153 school or school paraprofessional;

154 (2) "Qualified medical professional" means a physician licensed  
155 under chapter 370, dentist licensed under chapter 379, optometrist  
156 licensed under chapter 380, advanced practice registered nurse  
157 licensed under chapter 378, a physician assistant licensed under  
158 chapter 370 or a podiatrist licensed under chapter 375;

159 (3) "Medication" means any medicinal preparation, including any  
160 controlled substances specifically designated in the regulations or  
161 policies, adopted pursuant to section 20-14j, medication administered  
162 with a cartridge injector and medication administered through the use  
163 of an asthmatic inhaler;

164 (4) "Cartridge injector" means an automatic prefilled cartridge  
165 injector or similar automatic injectable equipment used to deliver  
166 epinephrine in a standard dose for emergency first aid response to  
167 allergic reactions; and

168 (5) "Injectable equipment used to administer glucagon" means an  
169 injector or injectable equipment used to deliver glucagon in an  
170 appropriate dose for emergency first aid response to diabetes.

171 (b) (1) Except as provided in subdivisions (3) and (4) of this  
172 subsection, a school nurse or, in the absence of such nurse, a qualified  
173 school professional may administer medication to any student  
174 pursuant to (A) the written authorization of a parent or guardian of  
175 such student, and (B) a written order of a qualified medical  
176 professional, provided such administration of medication is in  
177 accordance with the provisions of policies and procedures adopted  
178 pursuant to subsection (c) of this section. The administration of  
179 medication by a qualified school professional pursuant to this section  
180 shall be under the general supervision of a school nurse.

181       (2) A student may self-administer medication pursuant to (A) the  
182 written authorization of a parent or guardian of such student, and (B) a  
183 written order of a qualified medical professional, provided such  
184 administration of medication is in accordance with the provisions of  
185 policies and procedures adopted pursuant to subsection (c) of this  
186 section.

187       (3) With the written authorization of a student's parent or guardian,  
188 and pursuant to a written order of the student's physician licensed  
189 under chapter 370, a school nurse or a school principal shall select, and  
190 a school nurse shall provide general supervision to, a qualified school  
191 professional to administer medication with injectable equipment used  
192 to administer glucagon to a student with diabetes who may require  
193 prompt treatment in order to protect the student against serious harm  
194 or death. Such authorization shall be limited to situations when the  
195 school nurse is absent or unavailable. No qualified school professional  
196 shall administer medication under this subdivision unless (A) such  
197 qualified school professional annually completes training required by  
198 the school nurse and school medical advisor in the administration of  
199 medication with injectable equipment used to administer glucagon, (B)  
200 the school nurse and school medical advisor have attested, in writing,  
201 that such qualified school professional has completed such training,  
202 and (C) such qualified school professional voluntarily agrees to serve  
203 as a qualified school professional.

204       (4) A school nurse or, in the absence of a school nurse, a qualified  
205 school professional shall maintain epinephrine in cartridge injectors at  
206 the school that such school nurse or qualified school professional is  
207 employed for the purpose of emergency first aid to students who  
208 experience allergic reactions and do not have a prior written  
209 authorization of a parent or guardian or a prior written order of a  
210 qualified medical professional for the administration of epinephrine. A  
211 school nurse or a school principal shall select qualified school  
212 professionals to administer such epinephrine under this subdivision,  
213 and there shall be at least one such qualified school professional on the  
214 grounds of the school during regular school hours in the absence of a

215 school nurse. A school nurse or, in the absence of such school nurse,  
216 such qualified school professional may administer such epinephrine  
217 under this subdivision, provided such administration of epinephrine is  
218 in accordance with policies and procedures adopted pursuant to  
219 subsection (c) of this section. Such administration of epinephrine by a  
220 qualified school professional shall be limited to situations when the  
221 school nurse is absent or unavailable. No qualified school professional  
222 shall administer such epinephrine under this subdivision unless (A)  
223 such qualified school professional annually completes training  
224 required by the school nurse and school medical advisor in the  
225 administration of epinephrine, and (B) the school nurse and school  
226 medical advisor have attested, in writing, that such qualified school  
227 professional has completed such training.

228 (c) Any local and regional board of education that allows a school  
229 nurse or, in the absence of such nurse, a qualified school professional  
230 or qualified medical professional to administer medication or allows a  
231 student to self-administer medication, pursuant to subsection (b) of  
232 this section, shall adopt written policies and procedures regarding the  
233 administration of medication. Such policies and procedures shall (1) be  
234 in accordance with the provisions of this section and any regulations  
235 adopted pursuant to subsection (e) of this section, and (2) be approved  
236 by the school medical advisor or, in the absence of such school medical  
237 advisor, a qualified licensed physician.

238 (d) Each school in which medication is administered pursuant to  
239 this section shall keep a record, in accordance with the provisions of  
240 subsections (f) and (h) of section 21a-254, and shall store such  
241 medication in such manner as the Commissioner of Consumer  
242 Protection or State Board of Education shall, by regulation, require.

243 (e) The State Board of Education, in consultation with the  
244 Commissioner of Public Health, shall adopt regulations, in accordance  
245 with the provisions of chapter 54, determined to be necessary by the  
246 board to carry out the provisions of this section, including, but not  
247 limited to, regulations that (1) specify conditions under which a coach

248 of intramural or interscholastic athletics may administer medication to  
249 a child participating in such intramural or interscholastic athletics, (2)  
250 specify conditions and procedures for the administration of medication  
251 by qualified school professionals to students, (3) require the written  
252 authorization of a parent or guardian of a student and the written  
253 order of a qualified medical professional for the administration of  
254 medication by a school nurse or qualified school professional or the  
255 self-administration of medication by a student, (4) specify the  
256 conditions and manner under which medication shall be stored at  
257 schools, (5) authorize the storage and administration of epinephrine  
258 for the purpose of emergency first aid to students who experience  
259 allergic reactions and who do not have a prior written authorization of  
260 a parent or guardian or a prior written order of a qualified medical  
261 professional for the administration of epinephrine, in accordance with  
262 the provisions of subdivision (4) of subsection (b) of this section, and  
263 (6) specify conditions for self-administration of medication by  
264 students, including permitting a student diagnosed with: (A) Asthma  
265 to retain possession of an asthmatic inhaler at all times while attending  
266 school for prompt treatment of the student's asthma and to protect the  
267 student against serious harm or death provided a written  
268 authorization for self-administration of medication signed by the  
269 student's parent or guardian and an authorized prescriber is submitted  
270 to the school nurse, and (B) an allergic condition to retain possession of  
271 an automatic prefilled cartridge injector or similar automatic injectable  
272 equipment at all times while attending school for prompt treatment of  
273 the student's allergic condition and to protect the child against serious  
274 harm or death provided a written authorization for self-administration  
275 of medication signed by the student's parent or guardian and an  
276 authorized prescriber is submitted to the school nurse.

277 (f) No school nurse, qualified school professional or qualified  
278 medical professional administering medication pursuant to this section  
279 shall be liable to a child or a parent or guardian of such child for civil  
280 damages for any personal injuries that result from acts or omissions of  
281 such school nurse, qualified school professional or qualified medical  
282 professional, in administering such medication that may constitute

283 ordinary negligence. This immunity shall not apply to acts or  
284 omissions constituting gross, wilful or wanton negligence.

285       Sec. 2. (NEW) (*Effective July 1, 2014*) (a) A director of a school  
286 readiness program, as defined in section 10-16p of the general statutes,  
287 or a before or after school program exempt from licensure by the  
288 Department of Public Health, pursuant to subdivision (1) of subsection  
289 (b) of section 19a-77 of the general statutes, or the director's designee,  
290 may administer medication to a child enrolled in such a program in  
291 accordance with regulations adopted pursuant to subsection (c) of this  
292 section. No such director, or the director's designee, administering  
293 medication pursuant to this subsection shall be liable to such child or a  
294 parent or guardian of such child for civil damages for any personal  
295 injuries that result from acts or omissions of such director, or the  
296 director's designee, in administering such medication that may  
297 constitute ordinary negligence. This immunity shall not apply to acts  
298 or omissions constituting gross, wilful or wanton negligence.

299       (b) A nurse, in the absence of a school nurse, who is employed by or  
300 providing services under the direction of a local or regional board of  
301 education at a school-based health clinic may administer medication to  
302 only those students enrolled in such school-based health clinic in  
303 accordance with regulations adopted pursuant to subsection (c) of this  
304 section. No such nurse administering medication pursuant to this  
305 subsection shall be liable to such student or a parent or guardian of  
306 such student for civil damages for any personal injuries that result  
307 from acts or omissions of such nurse in administering such medication  
308 that may constitute ordinary negligence. This immunity shall not  
309 apply to acts or omissions constituting gross, wilful or wanton  
310 negligence.

311       (c) The State Board of Education, in consultation with the  
312 Commissioner of Public Health, shall adopt regulations, in accordance  
313 with the provisions of chapter 54 of the general statutes, determined to  
314 be necessary by the board to carry out the provisions of this section.

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2014	10-212a
Sec. 2	July 1, 2014	New section

**Statement of Legislative Commissioners:**

In section 10-212a (b)(1)(B), deleted "any" for consistency; in section 10-212a (b)(4) replaced "provided there is" with "and there shall be", and added "in the absence of a school nurse" for accuracy; in section 10-212a(e)(4), replaced "that" with "under which" for proper grammar; and in section 10-212a(f), replaced "such" with "a" for proper grammar.

**ED**      *Joint Favorable Subst.*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

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### **OFA Fiscal Note**

**State Impact:** None

**Municipal Impact:**

<b>Municipalities</b>	<b>Effect</b>	<b>FY 15 \$</b>	<b>FY 16 \$</b>
Local and Regional School Districts	STATE MANDATE - Cost	270-360 per school	270-360 per school

### **Explanation**

The bill results in a cost of approximately \$270-\$360 per school, associated with maintaining and storing epipens. Epipens cost, on average, \$90-\$120 per two-pack, and it is estimated that each school would require two to three packs. The bill requires school nurses or school principals to select qualified school professionals to be trained and administer epipens under the bill's provisions. The professionals must meet training and other requirements before being allowed to administer epipens. Schools must (1) have at least one qualified professional on the school grounds during regular school hours and (2) maintain a store of epipens for emergency use.

### **The Out Years**

Epipens expire yearly. Therefore, schools would be responsible for refilling their prescription, annually. The cost in the outyears would be dependent on the number of prescriptions filled, and the increasing cost of the medication.

Sources: *President Association of School Nurses of Connecticut*

**OLR Bill Analysis****sHB 5521*****AN ACT CONCERNING THE STORAGE AND ADMINISTRATION OF EPINEPHRINE AT PUBLIC SCHOOLS.*****SUMMARY:**

This bill requires schools to designate and train nonmedical staff to administer emergency epinephrine in cartridge injectors (“epipens”) to students having allergic reactions who were not previously known to have serious allergies. It authorizes the emergency use of epipens by nonmedical staff only if the school nurse is not present or available and certain conditions are met.

The bill permits the following individuals (i.e., “qualified school professionals”) to be trained and authorized: principal, teacher, licensed nurse, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach of school intramural or interscholastic athletics, and school paraprofessional. By law, (1) all of these individuals can, under specific circumstances, administer glucagon via injection to a student with diabetes and (2) a specifically designated paraprofessional can administer an epipen to a student with a known allergy.

The bill requires the school nurse or school principal to select qualified school professionals to be trained and administer epipens under the bill’s provisions. The professionals must meet training and other requirements before being allowed to administer epipens. Schools must (1) have at least one qualified professional on the school grounds during regular school hours and (2) maintain a store of epipens for emergency use.

The bill also makes conforming changes.

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EFFECTIVE DATE: July 1, 2014

## **STUDENTS WITH ALLERGIES**

### ***Administering Emergency Epinephrine***

The act requires a school nurse or principal to select qualified school professionals to, under certain conditions, give an emergency epinephrine injection to a student with having an allergic reaction without a prior written authorization from a parent or guardian or a written order from a qualified medical professional for the administration of epinephrine. It defines “qualified medical professional” as a Connecticut-licensed physician, dentist, optometrist, advanced practice registered nurse, physician assistant, or podiatrist.

Current law only allows (1) nonmedical staff to give emergency glucagon injections to diabetic students requiring prompt treatment to avoid serious harm or death and (2) a specifically designated paraprofessional to administer an epinephrine to a student with a known allergy. In both scenarios, nonmedical staff can administer injections if there is written authorization from the student’s parents and a written order from a physician.

The bill applies the same conditions and training requirements to employees administering epinephrine as currently exist for glucagon. They may administer the injections only if the:

1. school nurse is absent or unavailable;
2. employee has completed any annual training in how to administer epinephrine that the school nurse and school medical advisor require;
3. nurse and medical advisor attest, in writing, that the employee has completed the training; and
4. employee voluntarily agrees to the selection.

The school nurse must provide general supervision to the qualified employee.

***Maintaining Store of Emergency Epinephrine***

The bill requires the school nurse or, in the nurse's absence a qualified school professional, to maintain a store of epinephrine cartridge injectors for emergency use. The bill defines cartridge injector as an automatic prefilled cartridge injector or similar automatic injectable equipment used to deliver epinephrine in a standard dose for emergency first aid response to allergic reactions.

**REQUIREMENTS ON LOCAL AND REGIONAL BOARDS OF EDUCATION**

As with glucagon, the bill requires local and regional boards of education to adopt policies and procedures allowing emergency administration of epinephrine. The policies and procedures must conform with the bill's provisions and with State Board of Education regulations and be approved by the local board's medical advisor, or if there is none, a qualified licensed physician.

Each school that administers medication under the bill must record the administration as required by state law and store the medication as prescribed by Department of Consumer Protection regulations.

**SBE REGULATIONS**

The bill requires SBE to adopt regulations to address:

1. the conditions and manner under which medication will be stored at schools,
2. the authority to store and administer epinephrine for emergency first aid for students who experience allergic reactions and do not have a prior written parental authorization or a prior written order of a qualified medical professional for epinephrine administration.

**IMMUNITY FROM LIABILITY**

The bill extends the existing immunity from liability for employees and local boards provided under the glycogen law to the epinephrine provisions.

It bars anyone from making a claim against a town, board of education, or school employee for damages resulting from administration of medication under the bill. The immunity covers the qualified school personnel. It does not apply to acts or omissions that constitute gross, wilful, or wanton negligence.

The bill also extends immunity to those acting under an existing statute that allows school employees, other than the school nurse, including a principal, teacher, licensed nurse, licensed athletic trainer, licensed physical or occupational therapist employed by the school board, or coach to administer medicinal preparations, including controlled drugs the consumer protection commissioner designates, to a student pursuant to a written medical order.

## **RELATED PROVISIONS**

### ***School-Based Health Centers***

The bill broadens the types of drugs a nurse at a school-based health clinic can administer. Under current law, a health clinic nurse can administer only medicinal preparations, including controlled drugs the consumer protection commissioner designates. The bill removes the limitation that only drugs the commissioner designates can be administered, thus allowing school-based health clinic nurses to administer any drug.

The bill also eliminates the requirement that a board of education approve policies and procedures for administering of medication at a school-based health center.

### ***Physician and Dentist Authorization***

The bill narrows the type of doctor or dentist who can give an order authorizing (1) nonmedical staff to administer medications and controlled drugs and (2) students to self-administer (a) inhalers for asthma or (b) epipens for known allergic reactions. The bill allows only doctors and dentists licensed in Connecticut to give such orders, while under current law doctors and dentists licensed in other states are also authorized to do so.

**COMMITTEE ACTION**

Education Committee

Joint Favorable Substitute

Yea 32 Nay 0 (03/21/2014)