



Sen. Suzy Glowiak Hilton

Filed: 5/6/2026

10400HB3454sam001

LRB104 09749 BDA 37459 a

1 AMENDMENT TO HOUSE BILL 3454

2 AMENDMENT NO. _____. Amend House Bill 3454 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Illinois State Police Act is amended by
5 changing Section 40 as follows:

6 (20 ILCS 2610/40)

7 Sec. 40. Administration of epinephrine.

8 (a) This Section, along with Section 10.19 of the Illinois
9 Police Training Act, may be referred to as the Annie LeGere
10 Law.

11 (b) For the purposes of this Section, "epinephrine
12 delivery system" ~~"epinephrine auto-injector"~~ means a
13 single-use device used for the automatic injection of a
14 pre-measured dose of epinephrine into the human body
15 prescribed in the name of the Illinois State Police.

16 (c) The Illinois State Police may conduct or approve a

1 training program for State Police officers to recognize and
2 respond to anaphylaxis, including, but not limited to:

3 (1) how to recognize symptoms of an allergic reaction;

4 (2) how to respond to an emergency involving an
5 allergic reaction;

6 (3) how to administer an epinephrine delivery system
7 ~~epinephrine auto injector~~;

8 (4) how to respond to an individual with a known
9 allergy as well as an individual with a previously unknown
10 allergy;

11 (5) a test demonstrating competency of the knowledge
12 required to recognize anaphylaxis and administer an
13 epinephrine delivery system ~~epinephrine auto injector~~; and

14 (6) other criteria as determined in rules adopted by
15 the Illinois State Police.

16 (d) The Illinois State Police may authorize a State Police
17 officer who has completed the training program under
18 subsection (c) to carry, administer, or assist with the
19 administration of epinephrine delivery systems ~~epinephrine~~
20 ~~auto injectors~~ whenever he or she is performing official
21 duties.

22 (e) The Illinois State Police must establish a written
23 policy to control the acquisition, storage, transportation,
24 administration, and disposal of epinephrine delivery systems
25 ~~epinephrine auto injectors~~ before it allows any State Police
26 officer to carry and administer epinephrine delivery systems

1 ~~epinephrine auto injectors.~~

2 (f) A physician, physician assistant with prescriptive
3 authority, or advanced practice registered nurse with
4 prescriptive authority may provide a standing protocol or
5 prescription for epinephrine delivery systems ~~epinephrine~~
6 ~~auto injectors~~ in the name of the Illinois State Police to be
7 maintained for use when necessary.

8 (g) When a State Police officer administers an epinephrine
9 delivery system ~~epinephrine auto injector~~ in good faith, the
10 officer and the Illinois State Police, and its employees and
11 agents, including a physician, physician assistant with
12 prescriptive authority, or advanced practice registered nurse
13 with prescriptive authority who provides a standing order or
14 prescription for an epinephrine delivery system ~~epinephrine~~
15 ~~auto injector~~, incur no civil or professional liability,
16 except for willful and wanton conduct, as a result of any
17 injury or death arising from the use of an epinephrine
18 delivery system ~~epinephrine auto injector~~.

19 (Source: P.A. 104-24, eff. 1-1-26.)

20 Section 10. The Illinois Police Training Act is amended by
21 changing Section 10.19 as follows:

22 (50 ILCS 705/10.19)

23 Sec. 10.19. Training; administration of epinephrine.

24 (a) This Section, along with Section 40 of the Illinois

1 State Police Act, may be referred to as the Annie LeGere Law.

2 (b) For purposes of this Section, "epinephrine delivery
3 system" ~~"epinephrine auto-injector"~~ means a single-use device
4 used for the automatic injection of a pre-measured dose of
5 epinephrine into the human body prescribed in the name of a
6 local law enforcement agency.

7 (c) The Board shall conduct or approve an optional
8 advanced training program for law enforcement officers to
9 recognize and respond to anaphylaxis, including the
10 administration of an epinephrine delivery system ~~epinephrine~~
11 ~~auto-injector~~. The training must include, but is not limited
12 to:

13 (1) how to recognize symptoms of an allergic reaction;

14 (2) how to respond to an emergency involving an
15 allergic reaction;

16 (3) how to administer an epinephrine delivery system
17 ~~epinephrine auto-injector~~;

18 (4) how to respond to an individual with a known
19 allergy as well as an individual with a previously unknown
20 allergy;

21 (5) a test demonstrating competency of the knowledge
22 required to recognize anaphylaxis and administer an
23 epinephrine delivery system ~~epinephrine auto-injector~~; and

24 (6) other criteria as determined in rules adopted by
25 the Board.

26 (d) A local law enforcement agency may authorize a law

1 enforcement officer who has completed an optional advanced
2 training program under subsection (c) to carry, administer, or
3 assist with the administration of epinephrine delivery systems
4 ~~epinephrine auto injectors~~ provided by the local law
5 enforcement agency whenever the officer is performing official
6 duties.

7 (e) A local law enforcement agency that authorizes its
8 officers to carry and administer epinephrine delivery systems
9 ~~epinephrine auto injectors~~ under subsection (d) must establish
10 a policy to control the acquisition, storage, transportation,
11 administration, and disposal of epinephrine delivery systems
12 ~~epinephrine auto injectors~~ and to provide continued training
13 in the administration of epinephrine delivery systems
14 ~~epinephrine auto injectors~~.

15 (f) A physician, physician assistant with prescriptive
16 authority, or advanced practice registered nurse with
17 prescriptive authority may provide a standing protocol or
18 prescription for epinephrine delivery systems ~~epinephrine~~
19 ~~auto injectors~~ in the name of a local law enforcement agency
20 to be maintained for use when necessary.

21 (g) When a law enforcement officer administers an
22 epinephrine delivery system ~~epinephrine auto injector~~ in good
23 faith, the law enforcement officer and local law enforcement
24 agency, and its employees and agents, including a physician,
25 physician assistant with prescriptive authority, or advanced
26 practice registered nurse with prescriptive authority who

1 provides a standing order or prescription for an epinephrine
2 delivery system ~~epinephrine auto injector~~, incur no civil or
3 professional liability, except for willful and wanton conduct,
4 or as a result of any injury or death arising from the use of
5 an epinephrine delivery system ~~epinephrine auto injector~~.

6 (Source: P.A. 102-538, eff. 8-20-21; 102-694, eff. 1-7-22;
7 103-154, eff. 6-30-23.)

8 Section 15. The School Code is amended by changing Section
9 22-30 as follows:

10 (105 ILCS 5/22-30)

11 Sec. 22-30. Self-administration and self-carry of asthma
12 medication and epinephrine delivery systems ~~injectors~~;
13 administration of undesignated epinephrine delivery systems
14 ~~injectors~~; administration of an opioid antagonist;
15 administration of undesignated asthma medication; supply of
16 undesignated oxygen tanks; asthma episode emergency response
17 protocol.

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

20 "Asthma action plan" means a written plan developed with a
21 pupil's medical provider to help control the pupil's asthma.
22 The goal of an asthma action plan is to reduce or prevent
23 flare-ups and emergency department visits through day-to-day
24 management and to serve as a student-specific document to be

1 referenced in the event of an asthma episode.

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

6 "Epinephrine delivery system" means any form of
7 epinephrine that is approved by the United States Food and
8 Drug Administration, including any device that contains a dose
9 of epinephrine, and that is used to administer epinephrine
10 into the human body to prevent or treat a life-threatening
11 allergic reaction injector" ~~includes an auto injector approved~~
12 ~~by the United States Food and Drug Administration for the~~
13 ~~administration of epinephrine and a pre-filled syringe~~
14 ~~approved by the United States Food and Drug Administration and~~
15 ~~used for the administration of epinephrine that contains a~~
16 ~~pre-measured dose of epinephrine that is equivalent to the~~
17 ~~dosages used in an auto injector.~~

18 "Asthma medication" means quick-relief asthma medication,
19 including albuterol or other short-acting bronchodilators,
20 that is approved by the United States Food and Drug
21 Administration for the treatment of respiratory distress.

22 "Asthma medication" includes medication delivered through a
23 device, including a metered dose inhaler with a reusable or
24 disposable spacer or a nebulizer with a mouthpiece or mask.

25 "Opioid antagonist" means a drug that binds to opioid
26 receptors and blocks or inhibits the effect of opioids acting

1 on those receptors, including, but not limited to, naloxone
2 hydrochloride or any other similarly acting drug approved by
3 the U.S. Food and Drug Administration.

4 "Respiratory distress" means the perceived or actual
5 presence of wheezing, coughing, shortness of breath, chest
6 tightness, breathing difficulty, or any other symptoms
7 consistent with asthma. Respiratory distress may be
8 categorized as "mild-to-moderate" or "severe".

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

11 "Self-administration" means a pupil's discretionary use of
12 his or her prescribed asthma medication or epinephrine
13 delivery system ~~injector~~.

14 "Self-carry" means a pupil's ability to carry his or her
15 prescribed asthma medication or epinephrine delivery system
16 ~~injector~~.

17 "Standing protocol" may be issued by (i) a physician
18 licensed to practice medicine in all its branches, (ii) a
19 licensed physician assistant with prescriptive authority, or
20 (iii) a licensed advanced practice registered nurse with
21 prescriptive authority.

22 "Trained personnel" means any school employee or volunteer
23 personnel authorized in Sections 10-22.34, 10-22.34a, and
24 10-22.34b of this Code who has completed training under
25 subsection (g) of this Section to recognize and respond to
26 anaphylaxis, an opioid overdose, or respiratory distress.

1 "Undesignated asthma medication" means asthma medication
2 prescribed in the name of a school district, public school,
3 charter school, or nonpublic school.

4 "Undesignated epinephrine delivery system injector" means
5 an epinephrine delivery system injector prescribed in the name
6 of a school district, public school, charter school, or
7 nonpublic school.

8 (b) A school, whether public, charter, or nonpublic, must
9 permit the self-administration and self-carry of asthma
10 medication by a pupil with asthma or the self-administration
11 and self-carry of an epinephrine delivery system injector by a
12 pupil, provided that:

13 (1) the parents or guardians of the pupil provide to
14 the school (i) written authorization from the parents or
15 guardians for (A) the self-administration and self-carry
16 of asthma medication or (B) the self-carry of asthma
17 medication or (ii) for (A) the self-administration and
18 self-carry of an epinephrine delivery system injector or
19 (B) the self-carry of an epinephrine delivery system
20 ~~injector~~, written authorization from the pupil's
21 physician, physician assistant, or advanced practice
22 registered nurse; and

23 (2) the parents or guardians of the pupil provide to
24 the school (i) the prescription label, which must contain
25 the name of the asthma medication, the prescribed dosage,
26 and the time at which or circumstances under which the

1 asthma medication is to be administered, or (ii) for the
2 self-administration or self-carry of an epinephrine
3 delivery system injector, a written statement from the
4 pupil's physician, physician assistant, or advanced
5 practice registered nurse containing the following
6 information:

7 (A) the name and purpose of the epinephrine
8 delivery system injector;

9 (B) the prescribed dosage; and

10 (C) the time or times at which or the special
11 circumstances under which the epinephrine delivery
12 system injector is to be administered.

13 The information provided shall be kept on file in the office of
14 the school nurse or, in the absence of a school nurse, the
15 school's administrator.

16 (b-5) A school district, public school, charter school, or
17 nonpublic school may authorize the provision of a
18 student-specific or undesignated epinephrine delivery system
19 ~~injector~~ to a student or any personnel authorized under a
20 student's Individual Health Care Action Plan, allergy
21 emergency action plan, or plan pursuant to Section 504 of the
22 federal Rehabilitation Act of 1973 to administer an
23 epinephrine delivery system injector to the student, that
24 meets the student's prescription on file.

25 (b-10) The school district, public school, charter school,
26 or nonpublic school may authorize a school nurse or trained

1 personnel to do the following: (i) provide an undesignated
2 epinephrine delivery system ~~injector~~ to a student for
3 self-administration only or any personnel authorized under a
4 student's Individual Health Care Action Plan, allergy
5 emergency action plan, plan pursuant to Section 504 of the
6 federal Rehabilitation Act of 1973, or individualized
7 education program plan to administer to the student that meets
8 the student's prescription on file; (ii) administer an
9 undesignated epinephrine delivery system ~~injector~~ that meets
10 the prescription on file to any student who has an Individual
11 Health Care Action Plan, allergy emergency action plan, plan
12 pursuant to Section 504 of the federal Rehabilitation Act of
13 1973, or individualized education program plan that authorizes
14 the use of an epinephrine delivery system ~~injector~~; (iii)
15 administer an undesignated epinephrine delivery system
16 ~~injector~~ to any person that the school nurse or trained
17 personnel in good faith believes is having an anaphylactic
18 reaction; (iv) administer an opioid antagonist to any person
19 that the school nurse or trained personnel in good faith
20 believes is having an opioid overdose; (v) provide
21 undesignated asthma medication to a student for
22 self-administration only or to any personnel authorized under
23 a student's Individual Health Care Action Plan or asthma
24 action plan, plan pursuant to Section 504 of the federal
25 Rehabilitation Act of 1973, or individualized education
26 program plan to administer to the student that meets the

1 student's prescription on file; (vi) administer undesignated
2 asthma medication that meets the prescription on file to any
3 student who has an Individual Health Care Action Plan or
4 asthma action plan, plan pursuant to Section 504 of the
5 federal Rehabilitation Act of 1973, or individualized
6 education program plan that authorizes the use of asthma
7 medication; and (vii) administer undesignated asthma
8 medication to any person that the school nurse or trained
9 personnel believes in good faith is having respiratory
10 distress.

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

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

19 (c-5) When a school nurse or trained personnel administers
20 an undesignated epinephrine delivery system ~~injector~~ to a
21 person whom the school nurse or trained personnel in good
22 faith believes is having an anaphylactic reaction, administers
23 an opioid antagonist to a person whom the school nurse or
24 trained personnel in good faith believes is having an opioid
25 overdose, or administers undesignated asthma medication to a
26 person whom the school nurse or trained personnel in good

1 faith believes is having respiratory distress, notwithstanding
2 the lack of notice to the parents or guardians of the pupil or
3 the absence of the parents or guardians signed statement
4 acknowledging no liability, except for willful and wanton
5 conduct, the school district, public school, charter school,
6 or nonpublic school and its employees and agents, and a
7 physician, a physician assistant, or an advanced practice
8 registered nurse providing standing protocol and a
9 prescription for undesignated epinephrine delivery systems
10 ~~injectors~~, an opioid antagonist, or undesignated asthma
11 medication, are to incur no liability or professional
12 discipline, except for willful and wanton conduct, as a result
13 of any injury arising from the use of an undesignated
14 epinephrine delivery system ~~injector~~, the use of an opioid
15 antagonist, or the use of undesignated asthma medication,
16 regardless of whether authorization was given by the pupil's
17 parents or guardians or by the pupil's physician, physician
18 assistant, or advanced practice registered nurse.

19 (d) The permission for self-administration and self-carry
20 of asthma medication or the self-administration and self-carry
21 of an epinephrine delivery system ~~injector~~ is effective for
22 the school year for which it is granted and shall be renewed
23 each subsequent school year upon fulfillment of the
24 requirements of this Section.

25 (e) Provided that the requirements of this Section are
26 fulfilled, a pupil with asthma may self-administer and

1 self-carry his or her asthma medication or a pupil may
2 self-administer and self-carry an epinephrine delivery system
3 ~~injector~~ (i) while in school, (ii) while at a school-sponsored
4 activity, (iii) while under the supervision of school
5 personnel, or (iv) before or after normal school activities,
6 such as while in before-school or after-school care on
7 school-operated property or while being transported on a
8 school bus.

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

22 (e-10) Provided that the requirements of this Section are
23 fulfilled, a school nurse or trained personnel may administer
24 an opioid antagonist to any person whom the school nurse or
25 trained personnel in good faith believes to be having an
26 opioid overdose (i) while in school, (ii) while at a

1 school-sponsored activity, (iii) while under the supervision
2 of school personnel, or (iv) before or after normal school
3 activities, such as while in before-school or after-school
4 care on school-operated property. A school nurse or trained
5 personnel may carry an opioid antagonist on his or her person
6 while in school or at a school-sponsored activity.

7 (e-15) If the requirements of this Section are met, a
8 school nurse or trained personnel may administer undesignated
9 asthma medication to any person whom the school nurse or
10 trained personnel in good faith believes to be experiencing
11 respiratory distress (i) while in school, (ii) while at a
12 school-sponsored activity, (iii) while under the supervision
13 of school personnel, or (iv) before or after normal school
14 activities, including before-school or after-school care on
15 school-operated property. A school nurse or trained personnel
16 may carry undesignated asthma medication on his or her person
17 while in school or at a school-sponsored activity.

18 (f) The school district, public school, charter school, or
19 nonpublic school may maintain a supply of undesignated
20 epinephrine delivery systems ~~injectors~~ in any secure location
21 that is accessible before, during, and after school where an
22 allergic person is most at risk, including, but not limited
23 to, classrooms and lunchrooms. A physician, a physician
24 assistant who has prescriptive authority in accordance with
25 Section 7.5 of the Physician Assistant Practice Act of 1987,
26 or an advanced practice registered nurse who has prescriptive

1 authority in accordance with Section 65-40 of the Nurse
2 Practice Act may prescribe undesignated epinephrine delivery
3 systems ~~injectors~~ in the name of the school district, public
4 school, charter school, or nonpublic school to be maintained
5 for use when necessary. Any supply of epinephrine delivery
6 systems ~~injectors~~ shall be maintained in accordance with the
7 manufacturer's instructions.

8 The school district, public school, charter school, or
9 nonpublic school shall maintain a supply of an opioid
10 antagonist in any secure location where an individual may have
11 an opioid overdose, unless there is a shortage of opioid
12 antagonists, in which case the school district, public school,
13 charter school, or nonpublic school shall make a reasonable
14 effort to maintain a supply of an opioid antagonist. Unless
15 the school district, public school, charter school, or
16 nonpublic school is able to obtain opioid antagonists without
17 a prescription, a health care professional who has been
18 delegated prescriptive authority for opioid antagonists in
19 accordance with Section 5-23 of the Substance Use Disorder Act
20 shall prescribe opioid antagonists in the name of the school
21 district, public school, charter school, or nonpublic school,
22 to be maintained for use when necessary. Any supply of opioid
23 antagonists shall be maintained in accordance with the
24 manufacturer's instructions.

25 The school district, public school, charter school, or
26 nonpublic school may maintain a supply of asthma medication in

1 any secure location that is accessible before, during, or
2 after school where a person is most at risk, including, but not
3 limited to, a classroom or the nurse's office. A physician, a
4 physician assistant who has prescriptive authority under
5 Section 7.5 of the Physician Assistant Practice Act of 1987,
6 or an advanced practice registered nurse who has prescriptive
7 authority under Section 65-40 of the Nurse Practice Act may
8 prescribe undesignated asthma medication in the name of the
9 school district, public school, charter school, or nonpublic
10 school to be maintained for use when necessary. Any supply of
11 undesignated asthma medication must be maintained in
12 accordance with the manufacturer's instructions.

13 A school district that provides special educational
14 facilities for children with disabilities under Section
15 14-4.01 of this Code may maintain a supply of undesignated
16 oxygen tanks in any secure location that is accessible before,
17 during, and after school where a person with developmental
18 disabilities is most at risk, including, but not limited to,
19 classrooms and lunchrooms. A physician, a physician assistant
20 who has prescriptive authority in accordance with Section 7.5
21 of the Physician Assistant Practice Act of 1987, or an
22 advanced practice registered nurse who has prescriptive
23 authority in accordance with Section 65-40 of the Nurse
24 Practice Act may prescribe undesignated oxygen tanks in the
25 name of the school district that provides special educational
26 facilities for children with disabilities under Section

1 14-4.01 of this Code to be maintained for use when necessary.
2 Any supply of oxygen tanks shall be maintained in accordance
3 with the manufacturer's instructions and with the local fire
4 department's rules.

5 (f-3) Whichever entity initiates the process of obtaining
6 undesignated epinephrine delivery systems ~~injectors~~ and
7 providing training to personnel for carrying and administering
8 undesignated epinephrine delivery systems ~~injectors~~ shall pay
9 for the costs of the undesignated epinephrine delivery systems
10 ~~injectors~~.

11 (f-5) Upon any administration of an epinephrine delivery
12 system ~~injector~~, a school district, public school, charter
13 school, or nonpublic school must immediately activate the EMS
14 system and notify the student's parent, guardian, or emergency
15 contact, if known.

16 Upon any administration of an opioid antagonist, a school
17 district, public school, charter school, or nonpublic school
18 must immediately activate the EMS system and notify the
19 student's parent, guardian, or emergency contact, if known.

20 (f-10) Within 24 hours of the administration of an
21 undesignated epinephrine delivery system ~~injector~~, a school
22 district, public school, charter school, or nonpublic school
23 must notify the physician, physician assistant, or advanced
24 practice registered nurse who provided the standing protocol
25 and a prescription for the undesignated epinephrine delivery
26 system ~~injector~~ of its use.

1 Within 24 hours after the administration of an opioid
2 antagonist, a school district, public school, charter school,
3 or nonpublic school must notify the health care professional
4 who provided the prescription for the opioid antagonist of its
5 use.

6 Within 24 hours after the administration of undesignated
7 asthma medication, a school district, public school, charter
8 school, or nonpublic school must notify the student's parent
9 or guardian or emergency contact, if known, and the physician,
10 physician assistant, or advanced practice registered nurse who
11 provided the standing protocol and a prescription for the
12 undesignated asthma medication of its use. The district or
13 school must follow up with the school nurse, if available, and
14 may, with the consent of the child's parent or guardian,
15 notify the child's health care provider of record, as
16 determined under this Section, of its use.

17 (g) Prior to the administration of an undesignated
18 epinephrine delivery system ~~injector~~, trained personnel must
19 submit to the school's administration proof of completion of a
20 training curriculum to recognize and respond to anaphylaxis
21 that meets the requirements of subsection (h) of this Section.
22 Training must be completed annually. The school district,
23 public school, charter school, or nonpublic school must
24 maintain records related to the training curriculum and
25 trained personnel.

26 Prior to the administration of an opioid antagonist,

1 trained personnel must submit to the school's administration
2 proof of completion of a training curriculum to recognize and
3 respond to an opioid overdose, which curriculum must meet the
4 requirements of subsection (h-5) of this Section. The school
5 district, public school, charter school, or nonpublic school
6 must maintain records relating to the training curriculum and
7 the trained personnel.

8 Prior to the administration of undesignated asthma
9 medication, trained personnel must submit to the school's
10 administration proof of completion of a training curriculum to
11 recognize and respond to respiratory distress, which must meet
12 the requirements of subsection (h-10) of this Section.
13 Training must be completed annually, and the school district,
14 public school, charter school, or nonpublic school must
15 maintain records relating to the training curriculum and the
16 trained personnel.

17 (h) A training curriculum to recognize and respond to
18 anaphylaxis, including the administration of an undesignated
19 epinephrine delivery system ~~injector~~, may be conducted online
20 or in person.

21 Training shall include, but is not limited to:

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

24 (2) how to administer an epinephrine delivery system
25 ~~injector~~; and

26 (3) a test demonstrating competency of the knowledge

1 required to recognize anaphylaxis and administer an
2 epinephrine delivery system ~~injector~~.

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

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

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

7 (C) emergency follow-up procedures, including the
8 importance of calling 9-1-1 or, if 9-1-1 is not available,
9 other local emergency medical services;

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

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

14 (F) any policy developed by the State Board of
15 Education under Section 2-3.190.

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

1 materials. The State Board shall make these resource materials
2 available on its Internet website.

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

- 9 (1) how to recognize symptoms of an opioid overdose;
- 10 (2) information on drug overdose prevention and
11 recognition;
- 12 (3) how to perform rescue breathing and resuscitation;
- 13 (4) how to respond to an emergency involving an opioid
14 overdose;
- 15 (5) opioid antagonist dosage and administration;
- 16 (6) the importance of calling 9-1-1 or, if 9-1-1 is
17 not available, other local emergency medical services;
- 18 (7) care for the overdose victim after administration
19 of the overdose antagonist;
- 20 (8) a test demonstrating competency of the knowledge
21 required to recognize an opioid overdose and administer a
22 dose of an opioid antagonist; and
- 23 (9) other criteria as determined in rules adopted
24 pursuant to this Section.

25 (h-10) A training curriculum to recognize and respond to
26 respiratory distress, including the administration of

1 undesignated asthma medication, may be conducted online or in
2 person. The training must include, but is not limited to:

3 (1) how to recognize symptoms of respiratory distress
4 and how to distinguish respiratory distress from
5 anaphylaxis;

6 (2) how to respond to an emergency involving
7 respiratory distress;

8 (3) asthma medication dosage and administration;

9 (4) the importance of calling 9-1-1 or, if 9-1-1 is
10 not available, other local emergency medical services;

11 (5) a test demonstrating competency of the knowledge
12 required to recognize respiratory distress and administer
13 asthma medication; and

14 (6) other criteria as determined in rules adopted
15 under this Section.

16 (i) Within 3 days after the administration of an
17 undesignated epinephrine delivery system ~~injector~~ by a school
18 nurse, trained personnel, or a student at a school or
19 school-sponsored activity, the school must report to the State
20 Board of Education in a form and manner prescribed by the State
21 Board the following information:

22 (1) age and type of person receiving epinephrine
23 (student, staff, visitor);

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

26 (3) trigger that precipitated allergic episode;

1 (4) location where symptoms developed;

2 (5) number of doses administered;

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

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

6 If a school district, public school, charter school, or
7 nonpublic school maintains or has an independent contractor
8 providing transportation to students who maintains a supply of
9 undesignated epinephrine delivery systems ~~injectors~~, then the
10 school district, public school, charter school, or nonpublic
11 school must report that information to the State Board of
12 Education upon adoption or change of the policy of the school
13 district, public school, charter school, nonpublic school, or
14 independent contractor, in a manner as prescribed by the State
15 Board. The report must include the number of undesignated
16 epinephrine delivery systems ~~injectors~~ in supply.

17 (i-5) Within 3 days after the administration of an opioid
18 antagonist by a school nurse or trained personnel, the school
19 must report to the State Board of Education, in a form and
20 manner prescribed by the State Board, the following
21 information:

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

24 (2) the location where symptoms developed;

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

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

2 (i-10) Within 3 days after the administration of
3 undesignated asthma medication by a school nurse, trained
4 personnel, or a student at a school or school-sponsored
5 activity, the school must report to the State Board of
6 Education, on a form and in a manner prescribed by the State
7 Board of Education, the following information:

8 (1) the age and type of person receiving the asthma
9 medication (student, staff, or visitor);

10 (2) any previously known diagnosis of asthma for the
11 person;

12 (3) the trigger that precipitated respiratory
13 distress, if identifiable;

14 (4) the location of where the symptoms developed;

15 (5) the number of doses administered;

16 (6) the type of person administering the asthma
17 medication (school nurse, trained personnel, or student);

18 (7) the outcome of the asthma medication
19 administration; and

20 (8) any other information required by the State Board.

21 (j) By October 1, 2015 and every year thereafter, the
22 State Board of Education shall submit a report to the General
23 Assembly identifying the frequency and circumstances of
24 undesignated epinephrine and undesignated asthma medication
25 administration during the preceding academic year. Beginning
26 with the 2017 report, the report shall also contain

1 information on which school districts, public schools, charter
2 schools, and nonpublic schools maintain or have independent
3 contractors providing transportation to students who maintain
4 a supply of undesignated epinephrine delivery systems
5 ~~injectors~~. This report shall be published on the State Board's
6 Internet website on the date the report is delivered to the
7 General Assembly.

8 (j-5) Annually, each school district, public school,
9 charter school, or nonpublic school shall request an asthma
10 action plan from the parents or guardians of a pupil with
11 asthma. If provided, the asthma action plan must be kept on
12 file in the office of the school nurse or, in the absence of a
13 school nurse, the school administrator. Copies of the asthma
14 action plan may be distributed to appropriate school staff who
15 interact with the pupil on a regular basis, and, if
16 applicable, may be attached to the pupil's federal Section 504
17 plan or individualized education program plan.

18 (j-10) To assist schools with emergency response
19 procedures for asthma, the State Board of Education, in
20 consultation with statewide professional organizations with
21 expertise in asthma management and a statewide organization
22 representing school administrators, shall develop a model
23 asthma episode emergency response protocol before September 1,
24 2016. Each school district, charter school, and nonpublic
25 school shall adopt an asthma episode emergency response
26 protocol before January 1, 2017 that includes all of the

1 components of the State Board's model protocol.

2 (j-15) (Blank).

3 (j-20) On or before October 1, 2016 and every year
4 thereafter, the State Board of Education shall submit a report
5 to the General Assembly and the Department of Public Health
6 identifying the frequency and circumstances of opioid
7 antagonist administration during the preceding academic year.
8 This report shall be published on the State Board's Internet
9 website on the date the report is delivered to the General
10 Assembly.

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

13 (l) Nothing in this Section shall limit the amount of
14 epinephrine delivery systems ~~injectors~~ that any type of school
15 or student may carry or maintain a supply of.

16 (Source: P.A. 102-413, eff. 8-20-21; 102-813, eff. 5-13-22;
17 103-175, eff. 6-30-23; 103-196, eff. 1-1-24; 103-348, eff.
18 1-1-24; 103-542, eff. 7-1-24 (see Section 905 of P.A. 103-563
19 for effective date of P.A. 103-542); 103-605, eff. 7-1-24.)

20 Section 20. The Illinois Insurance Code is amended by
21 changing Section 356z.33 as follows:

22 (215 ILCS 5/356z.33)

23 Sec. 356z.33. Coverage for epinephrine delivery systems
24 ~~epinephrine injectors~~.

1 (a) A group or individual policy of accident and health
2 insurance or a managed care plan that is amended, delivered,
3 issued, or renewed on or after January 1, 2020 (the effective
4 date of Public Act 101-281) shall provide coverage for
5 medically necessary epinephrine delivery systems ~~epinephrine~~
6 ~~injectors~~ for persons 18 years of age or under. As used in this
7 Section, "epinephrine delivery system" ~~"epinephrine injector"~~
8 has the meaning given to that term in Section 5 of the
9 Epinephrine Delivery System ~~Epinephrine Injector~~ Act.

10 (b) An insurer that provides coverage for medically
11 necessary epinephrine delivery systems ~~epinephrine injectors~~
12 shall limit the total amount that an insured is required to pay
13 for a twin-pack of medically necessary epinephrine delivery
14 systems ~~epinephrine injectors~~ at an amount not to exceed \$60,
15 regardless of the type of epinephrine delivery system
16 ~~epinephrine injector~~; except that this provision does not
17 apply to the extent such coverage would disqualify a
18 high-deductible health plan from eligibility for a health
19 savings account pursuant to Section 223 of the Internal
20 Revenue Code (26 U.S.C. 223).

21 (c) Nothing in this Section prevents an insurer from
22 reducing an insured's cost sharing by an amount greater than
23 the amount specified in subsection (b).

24 (d) The Department may adopt rules as necessary to
25 implement and administer this Section.

26 (Source: P.A. 102-558, eff. 8-20-21; 103-454, eff. 1-1-25;

1 103-718, eff. 7-19-24.)

2 Section 25. The Medical Practice Act of 1987 is amended by
3 changing Section 65 as follows:

4 (225 ILCS 60/65)

5 (Section scheduled to be repealed on January 1, 2027)

6 Sec. 65. Annie LeGere Law; epinephrine delivery system
7 ~~epinephrine auto-injector~~. A licensee under this Act may not
8 be subject to discipline for providing a standing order or
9 prescription for an epinephrine delivery system ~~epinephrine~~
10 ~~auto-injector~~ in accordance with Section 40 of the Illinois
11 State Police Act or Section 10.19 of the Illinois Police
12 Training Act.

13 (Source: P.A. 102-538, eff. 8-20-21.)

14 Section 30. The Epinephrine Injector Act is amended by
15 changing Sections 1, 5, 10, 15, and 20 as follows:

16 (410 ILCS 27/1)

17 Sec. 1. Short title. This Act may be cited as the
18 Epinephrine Delivery System ~~Epinephrine Injector~~ Act.

19 (Source: P.A. 99-711, eff. 1-1-17; 100-799, eff. 1-1-19.)

20 (410 ILCS 27/5)

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

1 "Administer" means to directly apply an epinephrine
2 delivery system to the body of an individual.

3 "Authorized entity" means any entity or organization,
4 other than a school covered under Section 22-30 of the School
5 Code, in connection with or at which allergens capable of
6 causing anaphylaxis may be present, including, but not limited
7 to, independent contractors who provide student transportation
8 to schools, recreation camps, colleges and universities, day
9 care facilities, youth sports leagues, amusement parks,
10 restaurants, sports arenas, and places of employment. The
11 Department shall, by rule, determine what constitutes a day
12 care facility under this definition.

13 "Authorized individual" means an individual who has
14 successfully completed the training program under Section 10
15 of this Act.

16 "Department" means the Department of Public Health.

17 "Epinephrine delivery system" means any form of
18 epinephrine that is approved by the United States Food and
19 Drug Administration, including any device that contains a dose
20 of epinephrine, and that is used to administer epinephrine
21 into the human body to prevent or treat a life-threatening
22 allergic reaction.

23 "Health care practitioner" means a physician licensed to
24 practice medicine in all its branches under the Medical
25 Practice Act of 1987, a physician assistant under the
26 Physician Assistant Practice Act of 1987 with prescriptive

1 authority, or an advanced practice registered nurse with
2 prescribing authority under Article 65 of the Nurse Practice
3 Act.

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

6 "Undesignated epinephrine delivery system ~~injector~~" means
7 an epinephrine delivery system ~~injector~~ prescribed in the name
8 of an authorized entity.

9 (Source: P.A. 104-229, eff. 1-1-26.)

10 (410 ILCS 27/10)

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

12 (a) A health care practitioner may prescribe epinephrine
13 delivery systems ~~injectors~~ in the name of an authorized entity
14 or authorized individual for use in accordance with this Act,
15 and pharmacists and health care practitioners may dispense
16 epinephrine delivery systems pursuant to a prescription issued
17 in the name of an authorized entity or authorized individual.
18 Such prescriptions shall be valid for a period of 2 years.

19 (a-1) A health care provider with prescribing authority
20 who is employed by or under contract with the Department may
21 issue a statewide standing order for the dispensing of
22 epinephrine delivery systems for use under subsection (c) by
23 authorized individuals or by employees or agents of authorized
24 entities who have completed the training required by
25 subsection (d).

1 (b) An authorized entity or authorized individual may
2 acquire and stock a supply of undesignated epinephrine
3 delivery systems pursuant to a prescription issued under
4 subsection (a) of this Section. Such undesignated epinephrine
5 delivery systems shall be stored in a location readily
6 accessible in an emergency and in accordance with the
7 instructions for use of the epinephrine delivery systems. The
8 Department may establish any additional requirements an
9 authorized entity or authorized individual must follow under
10 this Act.

11 (c) An employee or agent of an authorized entity who is an
12 authorized individual or any other individual who is an
13 authorized individual may:

14 (1) anywhere allergens capable of causing anaphylaxis
15 may be present provide an epinephrine delivery system to
16 any individual whom the employee, agent, or other
17 individual believes in good faith is experiencing
18 anaphylaxis, or to the parent, guardian, or caregiver of
19 such individual, for immediate administration, regardless
20 of whether the individual has a prescription for an
21 epinephrine delivery system or has previously been
22 diagnosed with an allergy; or

23 (2) anywhere allergens capable of causing anaphylaxis
24 may be present administer an epinephrine delivery system
25 to any individual whom the employee, agent, or other
26 individual believes in good faith is experiencing

1 anaphylaxis, regardless of whether the individual has a
2 prescription for an epinephrine delivery system or has
3 previously been diagnosed with an allergy.

4 (d) An employee, agent, or other individual authorized
5 must complete an anaphylaxis training program before he or she
6 is able to provide or administer an epinephrine delivery
7 system under this Section. Such training shall be valid for a
8 period of 2 years and shall be conducted by a nationally
9 recognized organization experienced in training laypersons in
10 emergency health treatment. The Department shall include links
11 to training providers' websites on its website.

12 Training shall include, but is not limited to:

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

15 (2) how to administer an epinephrine delivery system;
16 and

17 (3) a test demonstrating competency of the knowledge
18 required to recognize anaphylaxis and administer an
19 epinephrine delivery system.

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

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

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

24 (C) emergency follow-up procedures; and

25 (D) other criteria as determined in rules adopted
26 pursuant to this Act.

1 Training may be conducted either online or in person. The
2 entity or individual conducting the training shall issue a
3 certificate to each person who successfully completes the
4 anaphylaxis training program. The Department shall approve
5 training programs and list permitted training programs on the
6 Department's Internet website.

7 (Source: P.A. 104-229, eff. 1-1-26.)

8 (410 ILCS 27/15)

9 Sec. 15. Costs. Whichever entity initiates the process of
10 obtaining undesignated epinephrine delivery systems and
11 providing training to personnel for carrying and administering
12 undesignated epinephrine delivery systems shall pay for the
13 costs of the undesignated epinephrine delivery systems.

14 (Source: P.A. 104-229, eff. 1-1-26.)

15 (410 ILCS 27/20)

16 Sec. 20. Limitations. The use of an undesignated
17 epinephrine delivery system in accordance with the
18 requirements of this Act does not constitute the practice of
19 medicine or any other profession that requires medical
20 licensure.

21 Nothing in this Act shall limit the amount of epinephrine
22 delivery systems that an authorized entity or individual may
23 carry or maintain a supply of.

24 (Source: P.A. 104-229, eff. 1-1-26.)

1 Section 35. The Emergency Asthma Inhalers and Allergy
2 Treatment for Children Act is amended by changing Section 10
3 as follows:

4 (410 ILCS 607/10)

5 Sec. 10. Possession, self-administration, and use of
6 epinephrine delivery systems ~~epinephrine auto injectors~~ or
7 inhalers at recreation camps and after-school care programs.

8 (a) A recreation camp or an after-school care program
9 shall permit a child with severe, potentially life-threatening
10 allergies to possess, self-administer, and use an epinephrine
11 delivery system ~~epinephrine auto injector~~ or inhaler, if the
12 following conditions are satisfied:

13 (1) The child has the written approval of his or her
14 parent or guardian.

15 (2) The recreational camp or after-school care program
16 administrator or, if a nurse is assigned to the camp or
17 program, the nurse shall receive copies of the written
18 approvals required under paragraph (1) of subsection (a)
19 of this Section.

20 (3) The child's parent or guardian shall submit
21 written verification confirming that the child has the
22 knowledge and skills to safely possess, self-administer,
23 and use an epinephrine delivery system ~~epinephrine~~
24 ~~auto injector~~ or inhaler in a camp or an after-school care

1 program setting.

2 (b) The child's parent or guardian shall provide the camp
3 or program with the following information:

4 (1) the child's name;

5 (2) the name, route, and dosage of medication;

6 (3) the frequency and time of medication
7 administration or assistance;

8 (4) the date of the order;

9 (5) a diagnosis and any other medical conditions
10 requiring medications, if not a violation of
11 confidentiality or if not contrary to the request of the
12 parent or guardian to keep confidential;

13 (6) specific recommendations for administration;

14 (7) any special side effects, contraindications, and
15 adverse reactions to be observed;

16 (8) the name of each required medication; and

17 (9) any severe adverse reactions that may occur to
18 another child, for whom the epinephrine delivery system
19 ~~epinephrine auto-injector~~ or inhaler is not prescribed,
20 should the other child receive a dose of the medication.

21 (c) If the conditions of this Act are satisfied, the child
22 may possess, self-administer, and use an epinephrine delivery
23 system ~~epinephrine auto-injector~~ or inhaler at the camp or
24 after-school care program or at any camp-sponsored or
25 program-sponsored activity, event, or program.

26 (d) The recreational camp or after-school care program

1 must inform the parents or guardians of the child, in writing,
2 that the recreational camp or after-school care program and
3 its employees and agents are to incur no liability, as
4 applicable, except for willful and wanton conduct, as a result
5 of any injury arising from the self-administration of
6 medication to the child. The parents or guardians of the child
7 must sign a statement acknowledging that the recreational camp
8 or after-school care program is to incur no liability, except
9 for willful and wanton conduct, as a result of any injury
10 arising from the self-administration of medication by the
11 child and that the parents or guardians must indemnify and
12 hold harmless the recreational camp or after-school care
13 program and its employees and agents, as applicable, against
14 any claims, except a claim based on willful and wanton
15 conduct, arising out of the self-administration of medication
16 by the child.

17 (e) After-school care program personnel who have completed
18 an anaphylaxis training program as identified under the
19 Epinephrine Delivery System ~~Epinephrine Injector~~ Act may
20 administer an undesignated epinephrine injection to any child
21 if the after-school care program personnel believe in good
22 faith that the child is having an anaphylactic reaction while
23 in the after-school care program. After-school care program
24 personnel may carry undesignated epinephrine delivery systems
25 ~~epinephrine injectors~~ on their person while in the
26 after-school care program.

1 (f) After-school care program personnel may administer
2 undesignated asthma medication to any child if the
3 after-school care program personnel believe in good faith that
4 the child is experiencing respiratory distress while in the
5 after-school care program. After-school care program personnel
6 may carry undesignated asthma medication on their person while
7 in the after-school care program.

8 (g) If after-school care program personnel are to
9 administer an undesignated epinephrine injection or an
10 undesignated asthma medication to a child, the after-school
11 care program personnel must inform the parents or guardians of
12 the child, in writing, that the after-school care program and
13 its employees and agents, acting in accordance with standard
14 protocols and the prescription for the injection or
15 medication, shall incur no liability, except for willful and
16 wanton conduct, as a result of any injury arising from the
17 administration of the injection or medication, notwithstanding
18 whether authorization was given by the child's parents or
19 guardians or by the child's physician, physician assistant, or
20 advanced practice registered nurse. A parent or guardian of
21 the child must sign a statement acknowledging that the
22 after-school care program and its employees and agents are to
23 incur no liability, except for willful and wanton conduct, as
24 a result of any injury arising from the administration of the
25 medication or injection, regardless of whether authorization
26 was given by a parent or guardian of the child or by the

1 child's physician, physician assistant, or advanced practice
2 registered nurse, and that the parent or guardian must also
3 indemnify and hold harmless the after-school care program and
4 its employees and agents against any claims, except a claim
5 based on willful and wanton conduct, arising out of the
6 administration of the medication or injection, regardless of
7 whether authorization was given by the child's parent or
8 guardian or by the child's physician, physician assistant, or
9 advanced practice registered nurse.

10 (h) If after-school care program personnel administer an
11 undesignated epinephrine injection to a person and the
12 after-school care program personnel believe in good faith the
13 person is having an anaphylactic reaction or administer
14 undesignated asthma medication to a person and believe in good
15 faith the person is experiencing respiratory distress, then
16 the after-school care program and its employees and agents,
17 acting in accordance with standard protocols and the
18 prescription for the injection or medication, shall not incur
19 any liability or be subject to professional discipline, except
20 for willful and wanton conduct, as a result of any injury
21 arising from the use of the injection or medication,
22 notwithstanding whether notice was given to or authorization
23 was given by the child's parent or guardian or by the child's
24 physician, physician assistant, or advanced practice
25 registered nurse and notwithstanding the absence of the
26 parent's or guardian's signed statement acknowledging release

1 from liability.

2 (i) The changes made to this Section by this amendatory
3 Act of the 103rd General Assembly apply to actions filed on or
4 after the effective date of this amendatory Act of the 103rd
5 General Assembly.

6 (Source: P.A. 103-438, eff. 8-4-23.)

7 Section 40. The Illinois Food, Drug and Cosmetic Act is
8 amended by changing Section 3.21 as follows:

9 (410 ILCS 620/3.21) (from Ch. 56 1/2, par. 503.21)

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

19 (Source: P.A. 102-538, eff. 8-20-21.)".