

1 AN ACT concerning health.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

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

20 "Asthma episode emergency response protocol" means a
21 procedure to provide assistance to a pupil experiencing
22 symptoms of wheezing, coughing, shortness of breath, chest
23 tightness, or breathing difficulty.

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

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

5 "Epinephrine injector" includes an auto-injector approved
6 by the United States Food and Drug Administration for the
7 administration of epinephrine and a pre-filled syringe
8 approved by the United States Food and Drug Administration and
9 used for the administration of epinephrine that contains a
10 pre-measured dose of epinephrine that is equivalent to the
11 dosages used in an auto-injector.

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

19 "Opioid antagonist" means a drug that binds to opioid
20 receptors and blocks or inhibits the effect of opioids acting
21 on those receptors, including, but not limited to, naloxone
22 hydrochloride or any other similarly acting drug approved by
23 the U.S. Food and Drug Administration.

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

26 "Self-administration" means a pupil's discretionary use of

1 his or her prescribed asthma medication or epinephrine injector
2 ~~auto-injector~~.

3 "Self-carry" means a pupil's ability to carry his or her
4 prescribed asthma medication or epinephrine injector
5 ~~auto-injector~~.

6 "Standing protocol" may be issued by (i) a physician
7 licensed to practice medicine in all its branches, (ii) a
8 licensed physician assistant with prescriptive authority, or
9 (iii) a licensed advanced practice registered nurse with
10 prescriptive authority.

11 "Trained personnel" means any school employee or volunteer
12 personnel authorized in Sections 10-22.34, 10-22.34a, and
13 10-22.34b of this Code who has completed training under
14 subsection (g) of this Section to recognize and respond to
15 anaphylaxis.

16 "Undesignated epinephrine injector ~~auto-injector~~" means an
17 epinephrine injector ~~auto-injector~~ prescribed in the name of a
18 school district, public school, or nonpublic school.

19 (b) A school, whether public or nonpublic, must permit the
20 self-administration and self-carry of asthma medication by a
21 pupil with asthma or the self-administration and self-carry of
22 an epinephrine injector ~~auto-injector~~ by a pupil, provided
23 that:

24 (1) the parents or guardians of the pupil provide to
25 the school (i) written authorization from the parents or
26 guardians for (A) the self-administration and self-carry

1 of asthma medication or (B) the self-carry of asthma
2 medication or (ii) for (A) the self-administration and
3 self-carry of an epinephrine injector ~~auto-injector~~ or (B)
4 the self-carry of an epinephrine injector ~~auto-injector~~,
5 written authorization from the pupil's physician,
6 physician assistant, or advanced practice registered
7 nurse; and

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

18 (A) the name and purpose of the epinephrine
19 injector ~~auto-injector~~;

20 (B) the prescribed dosage; and

21 (C) the time or times at which or the special
22 circumstances under which the epinephrine injector
23 ~~auto-injector~~ is to be administered.

24 The information provided shall be kept on file in the office of
25 the school nurse or, in the absence of a school nurse, the
26 school's administrator.

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

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

1 that the school nurse or trained personnel in good faith
2 believes is having an anaphylactic reaction; and (iv)
3 administer an opioid antagonist to any person that the school
4 nurse or trained personnel in good faith believes is having an
5 opioid overdose.

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

1 by the pupil's physician, physician assistant, or advanced
2 practice registered nurse and that the parents or guardians
3 must indemnify and hold harmless the school district, public
4 school, or nonpublic school and its employees and agents
5 against any claims, except a claim based on willful and wanton
6 conduct, arising out of the administration of asthma
7 medication, an epinephrine injector ~~auto-injector~~, or an
8 opioid antagonist regardless of whether authorization was
9 given by the pupil's parents or guardians or by the pupil's
10 physician, physician assistant, or advanced practice
11 registered nurse.

12 (c-5) When a school nurse or trained personnel administers
13 an undesignated epinephrine injector ~~auto-injector~~ to a person
14 whom the school nurse or trained personnel in good faith
15 believes is having an anaphylactic reaction or administers an
16 opioid antagonist to a person whom the school nurse or trained
17 personnel in good faith believes is having an opioid overdose,
18 notwithstanding the lack of notice to the parents or guardians
19 of the pupil or the absence of the parents or guardians signed
20 statement acknowledging no liability, except for willful and
21 wanton conduct, the school district, public school, or
22 nonpublic school and its employees and agents, and a physician,
23 a physician assistant, or an advanced practice registered nurse
24 providing standing protocol or prescription for undesignated
25 epinephrine injectors ~~auto-injectors~~, are to incur no
26 liability or professional discipline, except for willful and

1 wanton conduct, as a result of any injury arising from the use
2 of an undesignated epinephrine injector ~~auto-injector~~ or the
3 use of an opioid antagonist regardless of whether authorization
4 was given by the pupil's parents or guardians or by the pupil's
5 physician, physician assistant, or advanced practice
6 registered nurse.

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

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

23 (e-5) Provided that the requirements of this Section are
24 fulfilled, a school nurse or trained personnel may administer
25 an undesignated epinephrine injector ~~auto-injector~~ to any
26 person whom the school nurse or trained personnel in good faith

1 believes to be having an anaphylactic reaction (i) while in
2 school, (ii) while at a school-sponsored activity, (iii) while
3 under the supervision of school personnel, or (iv) before or
4 after normal school activities, such as while in before-school
5 or after-school care on school-operated property or while being
6 transported on a school bus. A school nurse or trained
7 personnel may carry undesignated epinephrine injectors
8 ~~auto-injectors~~ on his or her person while in school or at a
9 school-sponsored activity.

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

21 (f) The school district, public school, or nonpublic school
22 may maintain a supply of undesignated epinephrine injectors
23 ~~auto-injectors~~ in any secure location that is accessible
24 before, during, and after school where an allergic person is
25 most at risk, including, but not limited to, classrooms and
26 lunchrooms. A physician, a physician assistant who has been

1 delegated prescriptive authority in accordance with Section
2 7.5 of the Physician Assistant Practice Act of 1987, or an
3 advanced practice registered nurse who has been delegated
4 prescriptive authority in accordance with Section 65-40 of the
5 Nurse Practice Act may prescribe undesignated epinephrine
6 injectors ~~auto-injectors~~ in the name of the school district,
7 public school, or nonpublic school to be maintained for use
8 when necessary. Any supply of epinephrine injectors
9 ~~auto-injectors~~ shall be maintained in accordance with the
10 manufacturer's instructions.

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

22 (f-3) Whichever entity initiates the process of obtaining
23 undesignated epinephrine injectors ~~auto-injectors~~ and
24 providing training to personnel for carrying and administering
25 undesignated epinephrine injectors ~~auto-injectors~~ shall pay
26 for the costs of the undesignated epinephrine injectors

1 ~~auto-injectors.~~

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

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

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

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

21 (g) Prior to the administration of an undesignated
22 epinephrine injector ~~auto-injector~~, trained personnel must
23 submit to their school's administration proof of completion of
24 a training curriculum to recognize and respond to anaphylaxis
25 that meets the requirements of subsection (h) of this Section.
26 Training must be completed annually. The school district,

1 public school, or nonpublic school must maintain records
2 related to the training curriculum and trained personnel.

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

14 (h) A training curriculum to recognize and respond to
15 anaphylaxis, including the administration of an undesignated
16 epinephrine injector ~~auto-injector~~, may be conducted online or
17 in person.

18 Training shall include, but is not limited to:

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

21 (2) how to administer an epinephrine injector
22 ~~auto-injector~~; and

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

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

- 1 (A) a review of high-risk areas within a school and its
2 related facilities;
- 3 (B) steps to take to prevent exposure to allergens;
- 4 (C) emergency follow-up procedures;
- 5 (D) how to respond to a student with a known allergy,
6 as well as a student with a previously unknown allergy; and
- 7 (E) other criteria as determined in rules adopted
8 pursuant to this Section.

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

22 (h-5) A training curriculum to recognize and respond to an
23 opioid overdose, including the administration of an opioid
24 antagonist, may be conducted online or in person. The training
25 must comply with any training requirements under Section 5-23
26 of the Alcoholism and Other Drug Abuse and Dependency Act and

1 the corresponding rules. It must include, but is not limited
2 to:

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

4 (2) information on drug overdose prevention and
5 recognition;

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

7 (4) how to respond to an emergency involving an opioid
8 overdose;

9 (5) opioid antagonist dosage and administration;

10 (6) the importance of calling 911;

11 (7) care for the overdose victim after administration
12 of the overdose antagonist;

13 (8) a test demonstrating competency of the knowledge
14 required to recognize an opioid overdose and administer a
15 dose of an opioid antagonist; and

16 (9) other criteria as determined in rules adopted
17 pursuant to this Section.

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

24 (1) age and type of person receiving epinephrine
25 (student, staff, visitor);

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

- 1 (3) trigger that precipitated allergic episode;
- 2 (4) location where symptoms developed;
- 3 (5) number of doses administered;
- 4 (6) type of person administering epinephrine (school
5 nurse, trained personnel, student); and
- 6 (7) any other information required by the State Board.

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

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

- 23 (1) the age and type of person receiving the opioid
24 antagonist (student, staff, or visitor);
- 25 (2) the location where symptoms developed;
- 26 (3) the type of person administering the opioid

1 antagonist (school nurse or trained personnel); and

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

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

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

24 (j-10) To assist schools with emergency response
25 procedures for asthma, the State Board of Education, in
26 consultation with statewide professional organizations with

1 expertise in asthma management and a statewide organization
2 representing school administrators, shall develop a model
3 asthma episode emergency response protocol before September 1,
4 2016. Each school district, charter school, and nonpublic
5 school shall adopt an asthma episode emergency response
6 protocol before January 1, 2017 that includes all of the
7 components of the State Board's model protocol.

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

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

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

26 (l) Nothing in this Section shall limit the amount of

1 epinephrine injectors ~~auto-injectors~~ that any type of school or
2 student may carry or maintain a supply of.

3 (Source: P.A. 99-173, eff. 7-29-15; 99-480, eff. 9-9-15;
4 99-642, eff. 7-28-16; 99-711, eff. 1-1-17; 99-843, eff.
5 8-19-16; 100-201, eff. 8-18-17; 100-513, eff. 1-1-18.)

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

8 (410 ILCS 27/1)

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

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

12 (410 ILCS 27/5)

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

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

16 "Authorized entity" means any entity or organization,
17 other than a school covered under Section 22-30 of the School
18 Code, in connection with or at which allergens capable of
19 causing anaphylaxis may be present, including, but not limited
20 to, independent contractors who provide student transportation
21 to schools, recreation camps, colleges and universities, day
22 care facilities, youth sports leagues, amusement parks,
23 restaurants, sports arenas, and places of employment. The

1 Department shall, by rule, determine what constitutes a day
2 care facility under this definition.

3 "Department" means the Department of Public Health.

4 "Epinephrine injector" includes an auto-injector approved
5 by the United States Food and Drug Administration for the
6 administration of epinephrine and a pre-filled syringe
7 approved by the United States Food and Drug Administration and
8 used for the administration of epinephrine that contains a
9 pre-measured dose of epinephrine that is equivalent to the
10 dosages used in an auto-injector.

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

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

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

22 "Undesignated epinephrine injector ~~auto-injector~~" means an
23 epinephrine injector ~~auto-injector~~ prescribed in the name of an
24 authorized entity.

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

1 (410 ILCS 27/10)

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

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

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

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

22 (1) provide an epinephrine injector ~~auto-injector~~ to
23 any individual on the property of the authorized entity
24 whom the employee, agent, or other individual believes in
25 good faith is experiencing anaphylaxis, or to the parent,
26 guardian, or caregiver of such individual, for immediate

1 administration, regardless of whether the individual has a
2 prescription for an epinephrine injector ~~auto-injector~~ or
3 has previously been diagnosed with an allergy; or

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

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

19 Training shall include, but is not limited to:

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

22 (2) how to administer an epinephrine injector
23 ~~auto-injector~~; and

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

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

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

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

5 (C) emergency follow-up procedures; and

6 (D) other criteria as determined in rules adopted
7 pursuant to this Act.

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

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

12 (410 ILCS 27/15)

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

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

20 (410 ILCS 27/20)

21 Sec. 20. Limitations. The use of an undesignated
22 epinephrine injector ~~auto-injector~~ in accordance with the
23 requirements of this Act does not constitute the practice of
24 medicine or any other profession that requires medical

1 licensure.

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

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

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

8 (410 ILCS 620/3.21) (from Ch. 56 1/2, par. 503.21)

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

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