

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.)