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(FORM UPDATED: 08/11/2010)

WISCONSIN STATE LEGISLATURE ... PUBLIC HEARING - COMMITTEE RECORDS

2011-12

(session year)

Assembly

(Assembly, Senate or Joint)

Committee on Health...

COMMITTEE NOTICES ...

- Committee Reports ... **CR**
- Executive Sessions ... **ES**
- Public Hearings ... **PH**

INFORMATION COLLECTED BY COMMITTEE FOR AND AGAINST PROPOSAL

- Appointments ... **Appt** (w/Record of Comm. Proceedings)
- Clearinghouse Rules ... **CRule** (w/Record of Comm. Proceedings)
- Hearing Records ... bills and resolutions (w/Record of Comm. Proceedings)
(**ab** = Assembly Bill) (**ar** = Assembly Resolution) (**ajr** = Assembly Joint Resolution)
(**sb** = Senate Bill) (**sr** = Senate Resolution) (**sjr** = Senate Joint Resolution)
- Miscellaneous ... **Misc**

* Contents organized for archiving by: Stefanie Rose (LRB) (October 2013)

Assembly

Record of Committee Proceedings

Committee on Health

Assembly Bill 276

Relating to: allowing certain pupils to possess and use an epinephrine auto-injector.

By Representatives Strachota, Severson, Pridemore, Petryk, Jacque, Steineke, Kaufert, Brooks, Ripp, Bies, Ballweg, Rivard, Marklein, Endsley, Molepske Jr, Bewley and C. Taylor; cosponsored by Senators Galloway, Harsdorf, Schultz, Cowles, Moulton, Vinehout, Taylor and Olsen.

September 27, 2011 Referred to Committee on Health.

October 19, 2011 **PUBLIC HEARING HELD**

Present: (10) Representatives Stone, Severson, Van Roy, Strachota, Petersen, Litjens, Richards, Pasch, Seidel, C. Taylor.
Absent: (0) None.
Excused: (1) Representative Kaufert.

Appearances For

- Pat Strachota, West Bend — Rep., 58th Assembly District

Appearances Against

- None.

Appearances for Information Only

- None.

Registrations For

- Pam Galloway, Wausau — Senator, 29th Senate District
- Chris Rasch, Madison — Wisconsin Medical Society
- Michael Welsh, Madison — School Nutrition Assoc of WI
- Michael Welsh, Madison — WI Academy of Family Physicians
- Jennifer Kammerud, Madison — WI Dept of Public Instruction
- Lena Taylor, Milwaukee — Sen., 4th Senate District
- Andre Hermes, Madison — self

Registrations Against

- None.

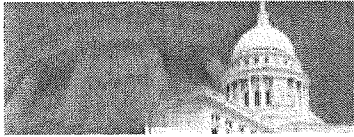
Registrations for Information Only

- None.

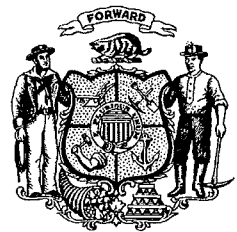
March 15, 2012

Failed to pass pursuant to Senate Joint Resolution 1.

Marsha Dake
Committee Clerk



WISCONSIN STATE LEGISLATURE





PAT STRACHOTA

STATE REPRESENTATIVE

ASSEMBLY COMMITTEE ON HEALTH

AB276

October 18, 2011

Good morning. I would like to thank the chair and members of the Committee for hearing my testimony today.

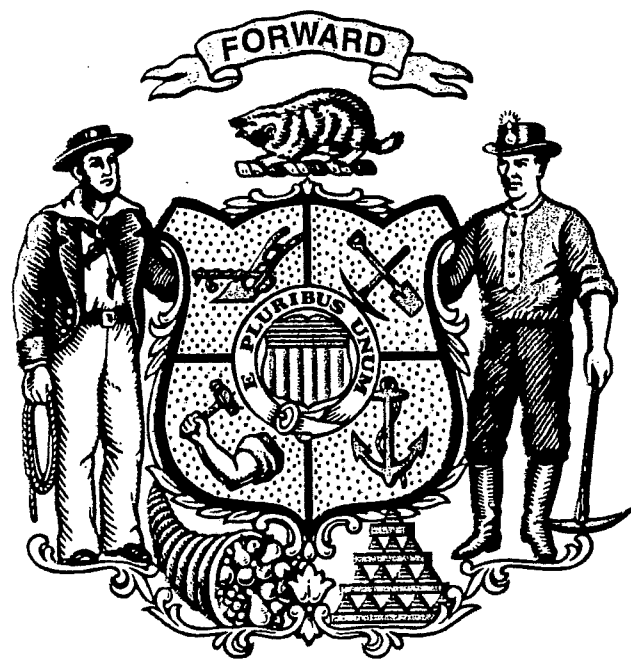
Finding yourself short of breath or breaking into a rash after eating a certain food or being stung or bitten by an insect is a terrifying situation. Unfortunately, that is exactly what happens to many Americans each and every day. Many of us know someone who has a severe allergy to something, and some of us may have seen this reaction occur or even been the one to experience a allergic reaction.

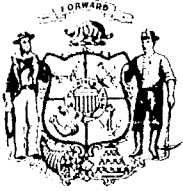
Anaphylaxis is a serious allergic reaction that can be triggered by food, medication, latex or insect stings. Three million children under the age of eighteen have food allergies, and that number is increasing. These food allergies cause more than 300,000 ambulatory care visits by children each year. Additionally, 20-25% of anaphylactic reactions occur in a child whose allergic condition was unknown by the school at the time of the reaction.

The prescriptive use of an epinephrine auto-injector has become an accepted and beneficial tool in protecting individuals from serious allergic reactions. The use of epinephrine auto-injector in schools has also become a common method of protecting children against severe reactions they may encounter during school hours. When a reaction occurs, it is vital that the immediate administration of epinephrine occurs. AB276 simply permits the student, while in school or at a school-sponsored activity, to possess and use an epinephrine auto-injector if the student uses the injector to prevent the onset or alleviate the symptoms in an emergency situation.

The bill will require the student to get the written approval of the physician and parent or guardian and provide a copy of the approvals to the school. The bill also says that no public, private or tribal school, employee or school board is civilly liable for any injury incurred by the student who uses or possesses an epinephrine auto-injector. This legislation follows the same procedures that were used previously to pass legislation for students who are asthmatics and need to carry an inhaler with them at all times.

This bill is supported by doctors, allergists, children's hospitals, and the Asthma Allergy Network/Mothers of Asthmatics group. This will align Wisconsin with 47 other states and the District of Columbia that currently allow for students to carry epinephrine auto-injectors on themselves.





Wisconsin State Senator
PAM GALLOWAY

Senate District 29

**Testimony on Assembly Bill 276
Wednesday, October 19, 2011**

Thank you for hearing Assembly Bill 276 today. I apologize that I could not attend in person but I want to thank you for accepting my submitted testimony.

Currently, Wisconsin is only one of two states that does not explicitly guarantee the right of a child to carry with them a medically necessary epinephrine auto-injector device, on their person while at school.

Epinephrine auto-injector devices are used for the treatment and prevention of life-threatening allergic reactions such as anaphylaxis.

For anyone not familiar with what anaphylaxis is, it is a severe allergic reaction that occurs when an individual is exposed to something that they have an allergy to. Anaphylaxis can occur within seconds or minutes of exposure. When an attack occurs, the immune system floods the body with chemicals and can cause that person to go into shock. Your blood pressure can drop suddenly and your airways begin to constrict. Other symptoms can occur such as a weak or rapid pulse, a skin rash, nausea, or vomiting.

In a recent study, the *Official Journal of the American Academy of Pediatrics* reported that the prevalence of food allergies among children under 18 years of age in the United States is at 8% or roughly 5.9 million,

which is higher than previously thought. Nearly 40% of those surveyed had a history of severe reactions and 30% had multiple food allergies.

According to the Centers for Disease Control there are eight foods that account for 90% of all food-allergy reactions. Some of these are foods or food products that children encounter in their school cafeterias on a daily basis such as milk, eggs, peanuts, tree nuts, soybeans, and wheat.

If you are a child or a person with a food allergy and you are exposed to peanuts, you could experience a reaction as severe as anaphylaxis. The fastest and easiest way to treat the symptoms of anaphylaxis is through the use of an epinephrine auto-injector. In some cases, the wait time for a child to obtain his or her prescribed epinephrine device from a school nurse or authority can be a matter of life or death.

The bill that Representative Strachota and I have authored will permit a child, with the written approval of their physician and their parents or guardian, provided to the school principal, to be able to carry this life saving device on their person, while in school, at a school-sponsored activity or under the supervision of a school authority.

I would like to thank Representative Strachota for her work on this bill and again thank you for hearing this bill today.