

Authorizing schools to maintain supplies of certain emergency medications to administer such medication in emergency situations

## **Proponent Testimony for HB2086**

January 19, 2021

Chairman Huebert, Vice-Chairman Thomas, Ranking Minority Stogsdill and committee members:

Thank you for the opportunity to testify as a proponent to HB 2086. This bill is a high priority need in Kansas school nurse offices today. This is a common barrier school nurses have in students with and without diagnoses. I bring to you some testimonies for a couple Kansas school nurses.

The first scenario is from Marica May of Olathe, Kansas. I had a new kindergarten student last year. I was told she had asthma, but parents didn't think she would need her inhaler at school and they only had 1 inhaler, so they planned to send it in her backpack every day. I was in the process of working with them to help them get a second inhaler that I could keep at school, when she came to my office one day. She was wheezing badly and had mild intercostal retractions. When she first came to me, her O2 was in the low 90's. We checked her backpack for her inhaler and it was left at home. I reached out to both parents. Both worked nearly 40 minutes away and said it would be nearly an hour before they could pick her up or get the inhaler to her. Her oxygen was dropping. It kept dipping into the upper 80's. I informed both parents I would have to call for help. I called for a rapid response team and they came to see her. By the time they arrived, she was steadily having O2 sats in the 80's and was visibly struggling to breathe. They administered two doses of albuterol with a nebulizer before parents arrived. Parents took her to the doctor and she ended up needing nearly a week stay in the hospital to recover. Not having an inhaler on hand caused a delay in care that drastically affected her condition. If I had been able to administer albuterol with the onset of her symptoms, it may have saved her a hospital stay. It could have helped her to improve enough that her parents could have had enough time to arrive with her own nebulizer treatment. Because I had nothing I could give her, she only got worse until she ended up in the hospital.

The second scenario is from Susan Rammage of Olathe, Kansas. This is my 21<sup>st</sup> year as a school nurse. I have always been at the secondary level and have needed to administer the Epi-Pen 3 times so far for anaphylactic reaction. The worse reaction I have ever seen was with a 9<sup>th</sup> grade basketball player that had no known allergies. He had taken Ibuprofen during the school day in the am and afternoon for lower back strain sustained from playing basketball. He had a severe reaction after he self-administered the second dose. If I had not had the stock Epipen to administer to him, the ER Dr. said he would have died.

These examples are only two of many stories that school nurses can share. Undoubtedly, having emergency medications available in our schools saves student lives. I urge you to support this bill that makes student safety and healthy outcomes in our children a priority.

Sincerely,

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