

AN ACT

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IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

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To allow health care professionals to prescribe and pharmacists to dispense and distribute epinephrine auto-injectors to authorized entities, to authorize employees or agents of an authorized entity who has completed a training program to provide or administer an epinephrine auto-injector, to require an employee or agent of an authorized entity to undergo training before providing or administering an epinephrine auto-injector, to authorize an authorized entity to store epinephrine auto-injectors, and to provide immunity from civil and criminal liability to certain persons and entities.

BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this act may be cited as the “Access to Treatment for Anaphylaxis Act of 2018”.

Sec. 2. Definitions.

For the purposes of this act, the term:

(1) “Administer” means the direct application of an epinephrine auto-injection to a human body.

(2) “Authorized entity” means any entity or organization other than a public school, including recreational camps, colleges, universities, day care facilities, youth sports leagues, restaurants, places of employment, and sports arenas.

(3) “Department” means the Department of Health.

(4) “Epinephrine auto-injector” means a disposable drug delivery system with a spring-activated needle that is designed for the emergency administration of epinephrine to a person suffering an episode of anaphylaxis.

(5) “Health care professional” means a physician, physician assistant, or advanced practice registered nurse licensed under the District of Columbia Health Occupations Revision Act of 1985, effective March 25, 1986 (D.C. Law 6-99; D.C. Official Code § 3-1201.01 *et seq.*).

(6) “Standing order” means a prescriptive order written by a health care professional that is not specific to and does not identify a particular patient.

**Sec. 3. Epinephrine prescriptions.**

(a) A health care professional acting in good faith may directly or by standing order prescribe an epinephrine auto-injector to an authorized entity that has an employee or agent who has completed the training program described in section 5.

(b) A pharmacist, in accordance with a health care professional's prescription or standing order, may dispense and distribute an epinephrine auto-injector to an authorized entity to whom an epinephrine auto-injector has been prescribed.

**Sec. 4. Authorized use.**

An employee or agent of an authorized entity who has completed the training program described in section 5 may use an epinephrine auto-injector prescribed pursuant to section 3 to:

(1) Provide an epinephrine auto-injector to any individual who the employee or agent believes in good faith is experiencing anaphylaxis, for immediate administration;

(2) Provide an epinephrine auto-injector to the parent, guardian, or caregiver of an individual who the employee or agent believes in good faith is experiencing anaphylaxis, for immediate administration; or

(3) Administer an epinephrine auto-injector to any individual who the employee or agent believes in good faith is experiencing anaphylaxis.

**Sec. 5. Training required.**

(a) An employee or agent of an authorized entity may not provide or administer an epinephrine auto-injector under this act unless he or she completes an anaphylaxis training program. The training program shall be conducted by:

(1) A nationally recognized organization experienced in training laypersons in emergency health treatment; or

(2) An entity or individual approved by the Department.

(b) The training program may be conducted online or in person and shall include instruction on:

(1) The recognition of signs and symptoms of severe allergic reactions, including anaphylaxis;

(2) Standards and procedures for the storage and administration of an epinephrine auto-injector; and

(3) Post-administration emergency medical follow-up procedures.

(c) An organization, individual, or entity that conducts the training program shall issue a certificate, on a form developed by the Department, to each person who successfully completes the training program.

**Sec. 6. Storing and maintaining epinephrine.**

(a) An authorized entity may acquire and maintain epinephrine auto-injectors obtained in accordance with section 3. Once acquired, the epinephrine auto-injectors shall be maintained:

- (1) In a location readily accessible in an emergency situation;
- (2) In accordance with the manufacturer's instructions for storage; and
- (3) In accordance with any additional requirements that may be established by the

Department.

(b) An authorized entity shall designate employees or agents who have completed the training described in section 5 to be responsible for the storage and maintenance of epinephrine auto-injectors acquired by the authorized entity.

**Sec. 7. Limitations on liability.**

(a) The following shall be immune from civil or criminal liability for the performance of actions authorized by this act; provided, that no immunity shall extend to gross negligence, recklessness, or intentional misconduct:

(1) An authorized entity and its employees or agents; and

(2) A third party that facilitates the availability of epinephrine auto-injectors to an authorized entity.

(b) The following shall be immune from civil or criminal liability for the performance of actions authorized by this act; provided, that no immunity shall extend to gross negligence, recklessness, intentional misconduct, or a willful or wanton disregard for the health or safety of others:

(1) A health care professional that prescribes epinephrine auto-injectors to an authorized entity;

(2) A pharmacist that dispenses or distributes epinephrine auto-injectors to an authorized entity; and

(3) An organization, individual, or entity that conducts the training described in section 5.

**Sec. 8. Incident reports.**

(a) An authorized entity that acquires and provides or administers epinephrine auto-injectors shall submit to the Department, on a form developed by the Department, a report of each incident on the authorized entity's premises that involves the provision or administration of an epinephrine auto-injector pursuant to section 4.

(b) By January 1, 2020, and annually thereafter, the Department shall publish a report summarizing and analyzing the reports submitted pursuant to subsection (a) of this section during the previous fiscal year.

**Sec. 9. Rules.**

The Mayor, pursuant to Title I of the District of Columbia Administrative Procedure Act, approved October 21, 1968 (82 Stat. 1204; D.C. Official Code § 2-501 *et seq.*), shall issue rules to implement the provisions of this act.

Sec. 10. Applicability.

(a) This act shall apply upon the date of inclusion of its fiscal effect in an approved budget and financial plan.

(b) The Chief Financial Officer shall certify the date of the inclusion of the fiscal effect in an approved budget and financial plan and provide notice to the Budget Director of the Council of the certification.

(c)(1) The Budget Director shall cause the notice of the certification to be published in the District of Columbia Register.

(2) The date of publication of the notice of the certification shall not affect the applicability of this act.

Sec. 11. Fiscal impact statement.

The Council adopts the fiscal impact statement in the committee report as the fiscal impact statement required by section 4a of the General Legislative Procedures Act of 1975, approved October 16, 2006 (120 Stat. 2038; D.C. Official Code § 1-301.47a).

Sec. 12. Effective date.

This act shall take effect following approval by the Mayor (or in the event of veto by the Mayor, action by the Council to override the veto), a 30-day period of congressional review as provided in section 602(c)(1) of the District of Columbia Home Rule Act, approved December 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(1)), and publication in the District of Columbia Register.

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Chairman  
Council of the District of Columbia

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Mayor  
District of Columbia