



Illinois State Board of Education


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Darren Reisberg
Chair of the Board

Dr. Carmen I. Ayala
State Superintendent of Education

MEMORANDUM

TO: The Honorable JB Pritzker, Governor
The Honorable Don Harmon, Senate President
The Honorable William E. Brady, Senate Minority Leader
The Honorable Michael J. Madigan, Speaker of the House
The Honorable Jim Durkin, House Minority Leader

FROM: Dr. Carmen I. Ayala 
State Superintendent of Education

DATE: September 24, 2020

SUBJECT: The Program and Administration of Undesignated Epinephrine Report,
School Year 2019-20

On behalf of the Illinois State Board of Education, which is required under Section 22-30 of the Illinois School Code [105 ILCS 5/22-30] to issue this report, I am pleased to submit "The Program and Administration of Undesignated Epinephrine Report, School Year 2019-20." This report summarizes the characteristics of cases and dosage of undesignated epinephrine administrations reported to the Illinois State Board of Education during the 2019-20 school year.

A summary of the major findings:

- There were 97 public schools across 65 districts and three nonpublic schools that reported 131 administrations of undesignated epinephrine during the 2019-20 school year. Chicago Public Schools District 299 experienced the greatest number with 29 incidents, while SD U-46 in Elgin and Waukegan CUSD 60 had the second greatest number of incidents with six each.
- A total of 119 of the individuals receiving epinephrine were students and 11 were staff members.
- Seventy-one of the students and staff members that received epinephrine had a previously known diagnosis of a severe allergy.

cc: Secretary of the Senate
Clerk of the House
Legislative Research Unit
State Government Report Center

**Administration of
Undesignated Epinephrine
School Year 2019-20**

Illinois State Board of Education

Wellness Department

September 2020

*Darren Reisberg, Chairman
State Board of Education*

*Dr. Carmen I. Ayala
State Superintendent of Education*

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Foreword

The administration of epinephrine via auto-injector from a stock supply to persons who may or may not have had a previous diagnosis of anaphylaxis to an allergen is permitted in Illinois schools by 105 ILCS 5/22-30. School Code requires a report form to be provided to the Illinois State Board of Education (ISBE) by each Illinois public and nonpublic school that administers undesignated epinephrine. This report must be sent to ISBE within three days of the incident that necessitated use of the undesignated supply of epinephrine. This report is a compilation of data on the frequency and circumstances of administration of undesignated epinephrine during the preceding academic year and the names of districts or schools that have instituted a policy and procedure for the administration of undesignated epinephrine.

Inquiries regarding this report may be directed to Rebecca Doran (email: rdoran@isbe.net) or Kimberly Barnes-Cummins (email: kbarnes@isbe.net) in the ISBE Wellness Department at (217) 782-5270.

Background

Section 22-30 of the Illinois School Code [105 ILCS 5/22-30] mandates that a school, whether public, charter, or nonpublic, must permit the self-administration and self-carry of an epinephrine injector by a pupil, provided that the parents or guardians of the pupil provide to the school written authorization for the self-administration and self-carry of an epinephrine injector, written authorization from the pupil's physician, physician assistant, or advanced practice registered nurse, and a written statement from the pupil's physician, physician assistant, or advanced practice registered nurse containing the name and purpose of the epinephrine injector, the prescribed dosage, and the time or times at which or the special circumstances under which the epinephrine injector is to be administered.

School districts, public schools, charter schools, or nonpublic schools may maintain a supply of undesignated epinephrine auto-injectors in any secure location that is accessible before, during, and after school where an allergic person is most at risk, including, but not limited to, classrooms and lunchrooms.

A school district, public school, charter school, or nonpublic school that maintains a supply of undesignated epinephrine injectors or has an independent contractor providing transportation to students who maintains such a supply must report that information to the State Board of Education upon adoption or change of a policy in a manner as prescribed by the State Board. The manner in which schools notify ISBE about policy is discussed in the Methodology section. The report must include the number of undesignated epinephrine injectors in supply.

The State Board of Education shall submit a report to the General Assembly by October 1 of each year identifying the frequency and circumstances of undesignated epinephrine administration during the preceding academic year. The report shall also contain information on which school districts, public schools, charter schools, and nonpublic

schools maintain or have independent contractors providing transportation to students who maintain a supply of undesignated epinephrine injectors.

Methodology

The 2019-20 epinephrine usage data collection was conducted using the “Undesignated Epinephrine Reporting Form” (ISBE 34-20) found at <https://www.isbe.net/Documents/34-20-undesignated-epinephrine-rptg.pdf>. Schools emailed the forms to epinephrine@isbe.net. The first reported use of undesignated epinephrine occurred on July 31, 2019, and the last on March 11, 2020.

The 2019-20 epinephrine policy data collection was conducted using the “Undesignated Epinephrine Policy Form” found at <https://www.surveymonkey.com/r/KJDTN8Y>. ISBE staff reviewed the forms and contacted school staff if additional information was needed.

Limitations

The following limitations in the data collection should be noted:

- The validity of the data reported is subject to the limitations of the aggregate nature.
- Detailed items like triggers may include multiple categories of triggers and may not indicate a case-by-case count.
- The potential trigger for the allergic reaction is not necessarily a medical diagnosis, as information on follow-up medical care was not collected.
- Percentages may not equal 100 for all data tables and figures due to rounding.
- This report does not include administration by school staff or by a student from the student’s own supply of (designated) epinephrine.

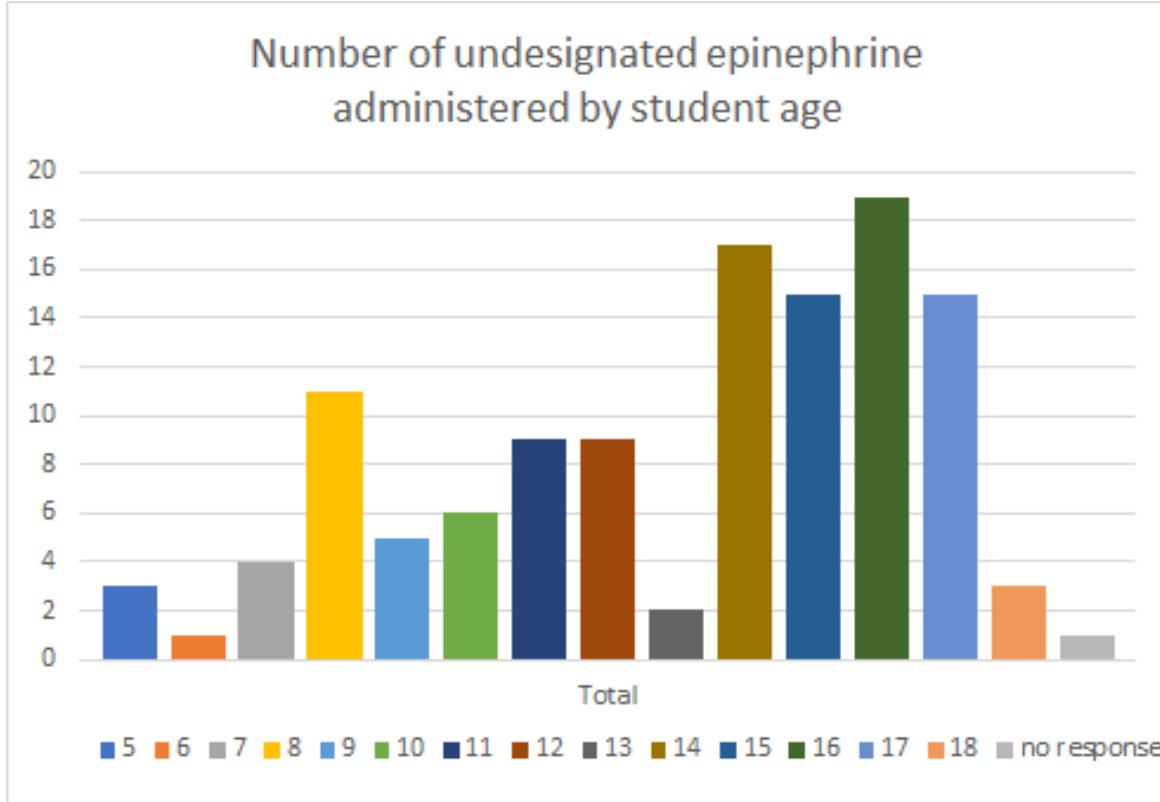
School Year 2019-20 Results

ISBE received reports of 131 incidents of administration of undesignated epinephrine during the 2019-2020 school year. There were 97 schools across 65 districts and three nonpublic schools that reported administration of at least one undesignated epinephrine during the 2019-20 school year. Chicago Public Schools District 299 reported the greatest number with 29 incidents, while SD U-46 in Elgin and Waukegan CUSD 60 had the second greatest number of incidents with six each. Reports of a single incident occurred within 47 public school districts or nonpublic schools.

Background and age

A total of 119 (90.8 percent) of the individuals receiving epinephrine were students and 11 (8.4 percent) were staff members. The average age of individuals receiving epinephrine was 15.96 years. One student report did not list the age of the individual.

Figure 1

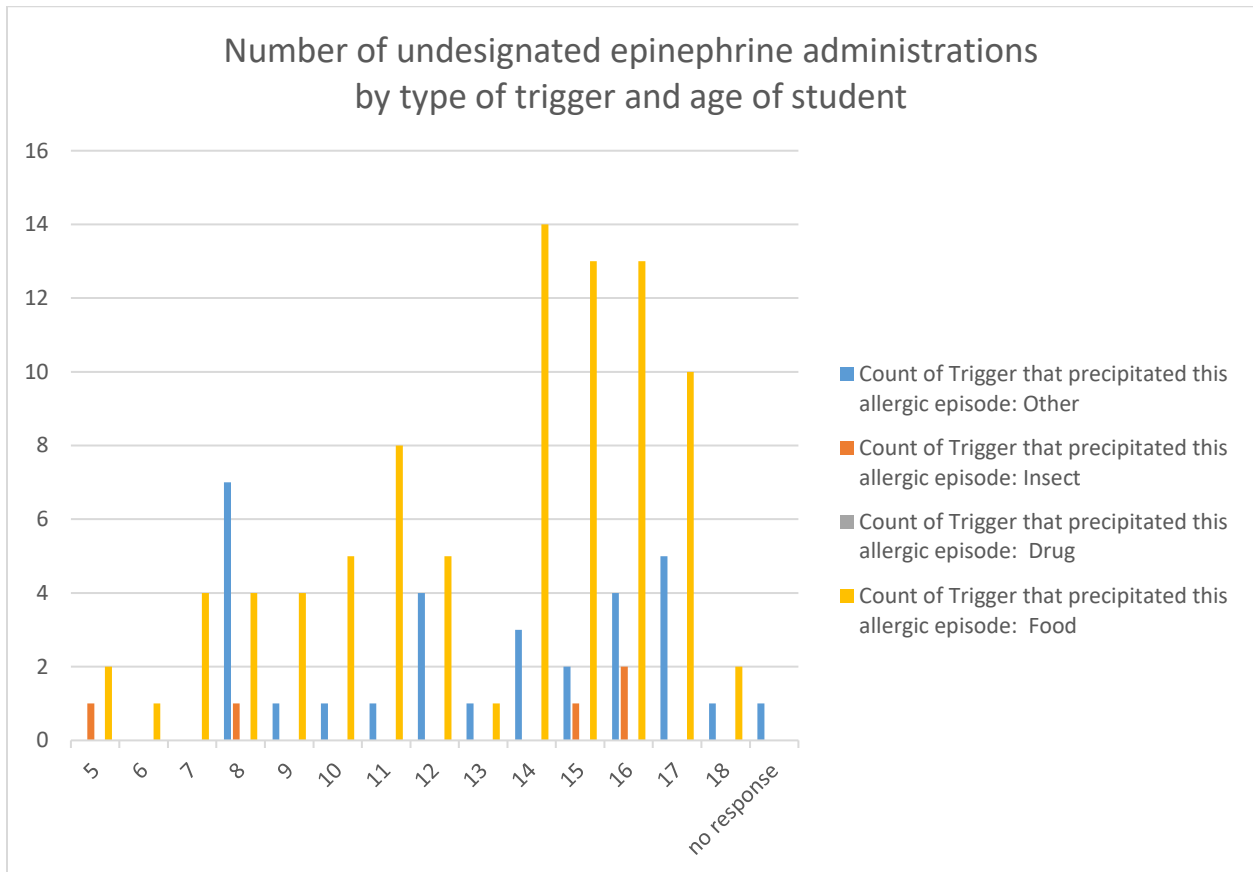


- The figure above shows the students age 16 (n=19) and 14 (n=17) had the two highest totals for reported incidents of epinephrine administration.
- The next most frequently reported occurrences were with students age 15 and 17 (n=15).

Triggers by category

There are four broad categories of triggers -- food, drug, insect, and other --listed on the reporting form.

Figure 2



Cross-referencing with the type of triggers that precipitated the allergic episode reveals the following:

- Students age 14 had the highest number food-related episodes. Triggers categorized as insect were highest among students age 16, while the greatest number of triggers in the other category was for students age 8.
- Seventy-one (53.8 percent) of the students and staff members who received epinephrine had a previously known diagnosis of a severe allergy. One student reportedly needed to use the school's undesignated dose due to having a designated one that was past expiration date.

Food-related triggers

Details on the type of food trigger were given for 82 of the 131 reports citing food-related triggers. Fifteen of the food trigger incidents (nearly 12 percent) listed peanuts, tree nuts, or products containing nuts as the trigger that caused allergic reaction. Many of the reports listed that food triggers were unknown; without further details, we are unable to provide more specificity.

Drug-related triggers

Table 1. Breakdown of Listed Responses in Drug-Related Triggers

Trigger (provided by reporting school/district)	Specify Drug
Drug	Valtrex
Drug	Doxycycline

Both instances of drug-related triggers were among staff members.

Insect-related triggers

There were eight reports of insect-related triggers; of those six identified bees as the trigger.

Unknown triggers

Thirty reports indicated an “unknown” trigger. However, one report detailed that the student was currently undergoing allergy testing.

Location of symptoms

The location of where symptoms developed was listed as within a school building in 85 percent (n=112) of reports. Eight reports indicated the incident occurred on school grounds.

Time of day for reported cases

Nearly 30 percent of the incidents (n=41) took place between 7:15 -10:59 a.m. The highest volume of cases, 41 percent of total incidents (n=54), occurred between 11:00 -12:59 p.m. Twenty-seven percent (n=35) of the occurrences happened between 1:00-3:00 p.m. One report did not provide a time for the incident.

Dosage administration

Less than 1 percent of the reports indicate administration of two doses of undesignated epinephrine; no indication of doses administered was evident in 3 percent of the reports. A single dose of epinephrine was administered for 95 percent (n=125) of the total reported incidents.

Doses were primarily administered by registered nurses 87 percent of the time (n=114). Epinephrine was administered by trained personnel 5 percent of the time (n=7). Nearly 4 percent (n=5) of the reports indicated self- administration by students. A total of 1.5 percent (n=2) of the incidents were categorized as “other” and involved individuals who were a parent of a student (dually as school staff), were other nursing personnel (e.g., licensed practical nurse) administered the epinephrine in 3 percent (n=4) of the cases.

Epinephrine policy reports

A school or district that institutes a policy or program offering undesignated epinephrine, revises an existing policy or program, or contracts with a student transportation company that has instituted such a policy and program must notify ISBE. Districts or schools that had neither a program to provide undesignated epinephrine nor a separate contracted student bus transportation company that offered the same did not need to report. Three districts reported to ISBE of newly adopting an undesignated epinephrine protocol and policy. There were zero reports of districts having independent contractors that provided student transportation and maintained a supply of undesignated epinephrine auto-injectors.

Table 2. Districts Reporting Undesignated Epinephrine Administration

Barrington CUSD #220	Belleville #118	Berkeley District #87	Berwyn South D #100	Bloomington Public Schools Dist. #87
Champaign Unit #4	Chester SD #139	CPS #299	CHSD # 218	Collinsville CUSD #10
CCSD #15	CHSD #230	CCSD #62	D #128	Decatur PS #61
District #181	District #204 IPSD	District #181	District #215	Edwardsville CUSD #7
Elgin SD U-46	Elmhurst #205	Fisher CUSD #1	Flossmoor District #161	Freemont School District #79
Galesburg CUSD #205	Geneva Community District #304	Gillespie Community School District #7	Glenbard District #387	High School District #117
High School District #214	Hinsdale #86	Huntly Consolidated SD #158	Illini Bluffs District #327	Indian Prairie School District #204

Kenilworth District #38	Lake Park HS District #108	LaSalle Peru Township HS #120	Lombard School District #44	Maine #207
McLean county Unit District #5	North Boone School District #200	Northbrook School District #27	O'Fallon CC School District #90	Olympia CUSD #16
Oswego CUSD #308	Paxton Buckley Loda CU #10	Peoria Public Schools #150	Pikeland CUSD #10	Plainfield School District #202
RRS #205	School District #25	School District #308	Springfield District #186	Township District #113
Township HS District #211	Township HS District #214	Tremont CUSD #702	University of Chicago Schools	Urbana School District #116
Waukegan District #60	Wheeling CCSD #21	Woodland District #10	WPS #60	Yorkville CUSD #115