AN ACT relating to public health; authorizing certain entities to obtain auto-injectable epinephrine for use when a person experiences anaphylaxis; specifying the qualifications of persons authorized to provide or administer auto-injectable epinephrine; requiring certain entities that maintain auto-injectable epinephrine to report the circumstances surrounding each administration of auto-injectable epinephrine; authorizing certain providers of health care to issue an order for auto-injectable epinephrine to a school or certain other entities; providing immunity to certain persons for acts or omissions relating to the acquisition, possession or administration of auto-injectable epinephrine in certain circumstances; providing a penalty; and providing other matters properly relating thereto.

Legislative Counsel’s Digest:
Existing law requires each public school in this State to obtain an order from a physician for auto-injectable epinephrine and maintain at least two doses at the school. (NRS 388.424) Existing law also authorizes a private school to obtain such an order and maintain auto-injectable epinephrine at the school. (NRS 394.1995) A school nurse or other trained employee at a public or private school that maintains auto-injectable epinephrine pursuant to such an order is authorized, during regular school hours, to administer auto-injectable epinephrine maintained at the school to any pupil on the premises of the school whom the school nurse or other trained employee reasonably believes is experiencing anaphylaxis. (NRS 388.424, 394.1995)

Section 3 of this bill authorizes an authorized entity to obtain an order from a physician, physician assistant or advanced practice registered nurse for auto-injectable epinephrine, and section 2 of this bill defines an “authorized entity” as any public or private entity, other than a public or private school, where allergens capable of causing anaphylaxis may be present on the premises of the entity or in connection with activities conducted by the entity. Sections 6, 6.5 and 7 of this bill authorize a physician, physician assistant or advanced practice registered nurse to issue such an order. Additionally, sections 5.2, 5.7, 6, 6.5 and 7 of this bill authorize a physician assistant or advanced practice registered nurse to issue an order for auto-injectable epinephrine to a public or private school.

Section 3 authorizes an authorized entity that has obtained such an order to maintain auto-injectable epinephrine at any location under the control of the authorized entity where allergens capable of causing anaphylaxis may be present. Additionally, section 3 provides that auto-injectable epinephrine maintained by an authorized entity may be provided or administered by: (1) an owner, employee or agent of the authorized entity who has received certain training; or (2) a person, other than an owner, employee or agent of the authorized entity, who is trained in the administration of auto-injectable epinephrine. Section 3 also requires an authorized entity to report the circumstances surrounding each administration of auto-injectable epinephrine to: (1) the State Board of Health if it occurs in a county
whose population is less than 700,000 (currently all counties other than Clark County); or (2) the district board of health if it occurs in a county whose population is 700,000 or more (Clark County). Section 4 of this bill prescribes requirements for the training to be provided to the owners, employees and agents of an authorized entity concerning the storage and administration of auto-injectable epinephrine.

Sections 5 and 6-8 of this bill exempt an authorized entity that maintains auto-injectable epinephrine, a person who administers auto-injectable epinephrine, a physician, physician assistant or advanced practice registered nurse who issues an order to authorize a school or an authorized entity to acquire and maintain auto-injectable epinephrine, a pharmacist who dispenses auto-injectable epinephrine pursuant to such an order and certain other persons from liability for certain damages relating to the acquisition, possession, provision or administration of auto-injectable epinephrine not amounting to gross negligence or willful or wanton conduct.

EXPLANATION – Matter in bolded italics is new; matter between brackets [omitted material] is material to be omitted.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Chapter 450B of NRS is hereby amended by adding thereto the provisions set forth as sections 2 to 5, inclusive, of this act.

Sec. 2. As used in sections 2 to 5, inclusive, of this act, unless the context otherwise requires, “authorized entity” means any public or private entity where allergens capable of causing anaphylaxis may be present on the premises of the entity or in connection with activities conducted by the entity. Such an entity may include, without limitation, a restaurant, recreation program, sports league, amusement park, stadium or arena. The term does not include a public or private school.

Sec. 3. 1. An authorized entity may obtain an order for auto-injectable epinephrine from a physician, osteopathic physician, physician assistant or advanced practice registered nurse, pursuant to NRS 630.374 or 633.707 or section 6.5 of this act to be maintained by the authorized entity at any location under control of the authorized entity where allergens capable of causing anaphylaxis may be present. If a dose of auto-injectable epinephrine maintained by the authorized entity is used or expires, the authorized entity may obtain an additional dose of auto-injectable epinephrine to replace the used or expired dose.

2. Auto-injectable epinephrine maintained by an authorized entity pursuant to this section may be provided to a person for self-administration or may be administered to any person reasonably believed to be experiencing anaphylaxis by:
(a) An owner, employee or agent of the authorized entity who has received the training required pursuant to section 4 of this act; or

(b) A person, other than an owner, employee or agent of the authorized entity, who is trained to recognize the symptoms of anaphylaxis and to administer auto-injectable epinephrine, who may include, without limitation, a provider of health care, a provider of emergency medical services, an athletic trainer or a family member of a person who suffers from allergies capable of causing anaphylaxis.

3. An authorized entity shall:

(a) Store auto-injectable epinephrine in a designated, secure location that is easily accessible and in compliance with the instructions provided by the manufacturer of the auto-injectable epinephrine and any requirements prescribed by the board; and

(b) Designate one or more employees or agents who have received the training described in section 4 of this act to be responsible for the storage, maintenance and oversight of the auto-injectable epinephrine maintained by the authorized entity.

4. Not later than 30 days after a dose of auto-injectable epinephrine maintained by an authorized entity is administered, the authorized entity shall report, on a form prescribed by the board, the circumstances surrounding such administration. The board shall publish an annual report summarizing and analyzing the information reported by authorized entities pursuant to this subsection.

5. As used in this section:

(a) “Provider of emergency medical services” means a person licensed as an attendant or certified as an emergency medical technician, advanced emergency medical technician or paramedic pursuant to this chapter.

(b) “Provider of health care” means a physician, nurse or physician assistant registered or licensed in this State.
(b) Must include, without limitation, instruction in:

(1) Recognizing the symptoms of a severe allergic reaction, including anaphylaxis;
(2) The proper storage and administration of auto-injectable epinephrine; and
(3) Follow-up procedures after the administration of auto-injectable epinephrine.

2. Upon completion of the training required pursuant to subsection 1, a person must be issued a certificate on a form developed or approved by the board to evidence completion of the training.

3. As used in this section, “distance education” means a program that offers instruction which is delivered by the Internet in such a manner that the person supervising or providing the instruction and the person receiving the instruction are separated geographically for a majority of the time during which the instruction is delivered.

Sec. 5. 1. An authorized entity that maintains auto-injectable epinephrine pursuant to section 3 of this act, an owner, employee or agent of such an authorized entity, a person who administers auto-injectable epinephrine pursuant to section 3 of this act and a person or organization that provides training pursuant to section 4 of this act is not liable for any error or omission concerning the acquisition, possession, provision or administration of auto-injectable epinephrine as authorized pursuant to section 3 of this act not amounting to gross negligence or reckless, willful or wanton conduct.

2. A person who administers auto-injectable epinephrine pursuant to section 3 of this act shall not be deemed to have engaged in the practice of medicine, osteopathic medicine or respiratory care for the purposes of chapter 630 or 633 of NRS or to have otherwise violated any provision relating to the practice of medicine, osteopathic medicine or respiratory care.

Sec. 5.2. NRS 388.424 is hereby amended to read as follows:

388.424 1. Each public school, including, without limitation, each charter school, shall obtain an order from a physician, osteopathic physician, physician assistant or advanced practice registered nurse, for auto-injectable epinephrine pursuant to NRS 630.374 or 633.707 or section 6.5 of this act and acquire at least two doses of the medication to be maintained at the school. If a dose of auto-injectable epinephrine maintained by the public school is used or expires, the public school shall ensure that at least two doses
of the medication are available at the school and obtain additional
doses to replace the used or expired doses if necessary.

2. Auto-injectable epinephrine maintained by a public school
pursuant to this section may be administered:

   (a) At a public school other than a charter school, by a school
       nurse or any other employee of the public school who has been
designated by the school nurse and has received training in the
proper storage and administration of auto-injectable epinephrine;
or

   (b) At a charter school, by the employee designated to be
       authorized to administer auto-injectable epinephrine pursuant to
NRS 386.598 if the person has received the training in the proper
storage and administration of auto-injectable epinephrine.

3. A school nurse or other designated employee of a public
school may administer auto-injectable epinephrine maintained at
the school to any pupil on the premises of the public school during
regular school hours whom the school nurse or other designated
employee reasonably believes is experiencing anaphylaxis.

4. A public school may accept gifts, grants and donations from
any source for the support of the public school in carrying out the
provisions of this section, including, without limitation, the
acceptance of auto-injectable epinephrine from a manufacturer or
wholesaler of auto-injectable epinephrine.

Sec. 5.7. NRS 394.1995 is hereby amended to read as follows:

394.1995  1. A private school may obtain an order from a
physician, osteopathic physician, physician assistant or
advanced practice registered nurse for auto-injectable epinephrine
pursuant to NRS 630.374 or 633.707 or section 6.5 of this act to be
maintained at the school. If a dose of auto-injectable epinephrine
maintained by the private school is used or expires, the private
school may obtain additional doses of auto-injectable epinephrine to
replace the used or expired auto-injectable epinephrine.

2. Auto-injectable epinephrine maintained by a private school
pursuant to this section may be administered by a school nurse or
any other employee of the private school who has received training
in the proper storage and administration of auto-injectable
epinephrine.

3. A school nurse or other trained employee may administer
auto-injectable epinephrine maintained at the school to any pupil on
the premises of the private school during regular school hours whom
the school nurse or other trained employee reasonably believes is
experiencing anaphylaxis.
4. A private school shall ensure that auto-injectable epinephrine maintained at the school is stored in a designated, secure location that is unlocked and easily accessible.

Sec. 6. NRS 630.374 is hereby amended to read as follows:

630.374  1. A physician or physician assistant may issue to a public or private school an order to allow the school to obtain and maintain auto-injectable epinephrine at the school, regardless of whether any person at the school has been diagnosed with a condition which may cause the person to require such medication for the treatment of anaphylaxis.

2. A physician or physician assistant may issue to an authorized entity an order to allow the authorized entity to obtain and maintain auto-injectable epinephrine at any location under the control of the authorized entity where allergens capable of causing anaphylaxis may be present, regardless of whether any person employed by, affiliated with or served by the authorized entity has been diagnosed with a condition which may cause the person to require such medication for the treatment of anaphylaxis.

3. An order issued pursuant to subsection 1 or 2 must contain:
   (a) The name and signature of the physician or physician assistant and the address of the physician or physician assistant if not immediately available to the pharmacist;
   (b) The classification of his or her license;
   (c) The name of the public or private school or authorized entity to which the order is issued;
   (d) The name, strength and quantity of the drug authorized to be obtained and maintained by the order; and
   (e) The date of issue.

4. A physician or physician assistant is not subject to disciplinary action solely for issuing a valid order pursuant to subsection 1 or 2 to an entity other than a natural person and without knowledge of a specific natural person who requires the medication.

5. A physician or physician assistant is not liable for any error or omission concerning the acquisition, possession, provision or administration of auto-injectable epinephrine maintained by a public or private school or authorized entity pursuant to an order issued by the physician or physician assistant pursuant to subsection 1 or 2 not resulting from gross negligence or reckless, willful or wanton conduct of the physician or physician assistant.

6. As used in this section:
(a) “Authorized entity” has the meaning ascribed to it in section 2 of this act.

(b) “Private school” has the meaning ascribed to it in NRS 394.103.

(c) “Public school” has the meaning ascribed to it in NRS 385.007.

Sec. 6.5. Chapter 632 of NRS is hereby amended by adding thereto a new section to read as follows:

1. An advanced practice registered nurse may issue to a public or private school an order to allow the school to obtain and maintain auto-injectable epinephrine at the school, regardless of whether any person at the school has been diagnosed with a condition which may cause the person to require such medication for the treatment of anaphylaxis.

2. An advanced practice registered nurse may issue to an authorized entity an order to allow the authorized entity to obtain and maintain auto-injectable epinephrine at any location under the control of the authorized entity where allergens capable of causing anaphylaxis may be present, regardless of whether any person employed by, affiliated with or served by the authorized entity has been diagnosed with a condition which may cause the person to require such medication for the treatment of anaphylaxis.

3. An order issued pursuant to subsection 1 or 2 must contain:
   (a) The name and signature of the advanced practice registered nurse and the address of the advanced practice registered nurse if not immediately available to the pharmacist;
   (b) The classification of his or her license;
   (c) The name of the public or private school or authorized entity to which the order is issued;
   (d) The name, strength and quantity of the drug authorized to be obtained and maintained by the order; and
   (e) The date of issue.

4. An advanced practice registered nurse is not subject to disciplinary action solely for issuing a valid order pursuant to subsection 1 or 2 to an entity other than a natural person and without knowledge of a specific natural person who requires the medication.

5. An advanced practice registered nurse is not liable for any error or omission concerning the acquisition, possession, provision or administration of auto-injectable epinephrine maintained by a public or private school or authorized entity...
pursuant to an order issued by the advanced practice registered nurse pursuant to subsection 1 or 2 not resulting from gross negligence or reckless, willful or wanton conduct of the advanced practice registered nurse.

6. As used in this section:
   (a) “Authorized entity” has the meaning ascribed to it in section 2 of this act.
   (b) “Private school” has the meaning ascribed to it in NRS 394.103.
   (c) “Public school” has the meaning ascribed to it in NRS 385.007.

Sec. 7. NRS 633.707 is hereby amended to read as follows:

633.707  1. An osteopathic physician or physician assistant may issue to a public or private school an order to allow the school to obtain and maintain auto-injectable epinephrine at the school, regardless of whether any person at the school has been diagnosed with a condition which may cause the person to require such medication for the treatment of anaphylaxis.

2. An osteopathic physician or physician assistant may issue to an authorized entity an order to allow the authorized entity to obtain and maintain auto-injectable epinephrine at any location under the control of the authorized entity where allergens capable of causing anaphylaxis may be present, regardless of whether any person employed by, affiliated with or served by the authorized entity has been diagnosed with a condition which may cause the person to require such medication for the treatment of anaphylaxis.

3. An order issued pursuant to subsection 1 or 2 must contain:
   (a) The name and signature of the osteopathic physician or physician assistant and the address of the osteopathic physician or physician assistant if not immediately available to the pharmacist;
   (b) The classification of his or her license;
   (c) The name of the public or private school or authorized entity to which the order is issued;
   (d) The name, strength and quantity of the drug authorized to be obtained and maintained by the order; and
   (e) The date of issue.

4. An osteopathic physician or physician assistant is not subject to disciplinary action solely for issuing a valid order pursuant to subsection 1 or 2 to an entity other than a natural person and without knowledge of a specific natural person who requires the medication.
5. An osteopathic physician or physician assistant is not liable for any error or omission concerning the acquisition, possession, provision or administration of auto-injectable epinephrine maintained by a public or private school or authorized entity pursuant to an order issued by the osteopathic physician or physician assistant not resulting from gross negligence or reckless, willful or wanton conduct of the osteopathic physician or physician assistant.

6. As used in this section:
   (a) “Authorized entity” has the meaning ascribed to it in section 2 of this act.
   (b) “Private school” has the meaning ascribed to it in NRS 394.103.
   (c) “Public school” has the meaning ascribed to it in NRS 385.007.

Sec. 8. NRS 639.2357 is hereby amended to read as follows:

639.2357  1. Upon the request of a patient, or a public or private school or an authorized entity for which an order was issued pursuant to NRS 630.374 or 633.707 or section 6.5 of this act, a registered pharmacist shall transfer a prescription or order to another registered pharmacist.

2. A registered pharmacist who transfers a prescription or order pursuant to subsection 1 shall comply with any applicable regulations adopted by the Board relating to the transfer.

3. The provisions of this section do not authorize or require a pharmacist to transfer a prescription or order in violation of:
   (a) Any law or regulation of this State;
   (b) Federal law or regulation; or
   (c) A contract for payment by a third party if the patient is a party to that contract.

4. A pharmacist is not liable for any error or omission concerning the acquisition, possession, provision or administration of auto-injectable epinephrine that the pharmacist has dispensed to a public or private school or authorized entity pursuant to an order issued pursuant to NRS 630.374 or 633.707 or section 6.5 of this act not resulting from gross negligence or reckless, willful or wanton conduct of the pharmacist.

5. As used in this section, “authorized entity” has the meaning ascribed to it in section 2 of this act.