To: Oregon State Legislature

From: Roberta Lincoln, resident of Salem, Oregon

**RE:** Support for House Bill 2749

My name is Roberta Lincoln, and I am here as a citizen of Oregon and more importantly as a parent of a young child with multiple life-threatening (anaphylactic) food allergies. I strongly support House Bill 2749, and I urge you to support and pass this bill as well.

I am the parent of a 4-year-old special needs child, who will be entering Kindergarten in the Fall of 2013. This bill would not only allow my son to have his Epinephrine and other allergen-blocking medications in his classroom, and readily available, but would also support the training of the teachers who would be responsible for his care. Please allow me to explain why I feel passionately about his bill. When my son was only 6-months of age, he suffered a life-threatening allergic reaction, known as anaphylaxis, to a milk-based baby formula while in care at his licensed daycare center.

Of course, every person's individual experience with anaphylactic episodes is different. However, they are all life threatening, and can mean death within minutes. In our experience, I arrived at my son's daycare center within 5 minutes of the start of his reaction – upon arrival he was unconscious. Emergency responders were on the scene within the following 2 to 3 minutes. My son was rushed to Salem Hospital—a two-mile ambulance ride. He received emergency treatment with multiple epinephrine injections during this ride. And, while he arrived at the hospital in less than 15 minutes from the on-set of his anaphylactic episode, his remained in critical condition – the situation continued to be precarious and unpredictable for the next hour.

At the hospital, the doctors informed me that the safest course of action would be to life-flight my infant son to Doernbecher Children's Hospital. However, his condition was so unstable, and he was so close to death, that the doctors believed there wasn't enough time to air-lift him there -- all we could do was hope that the treatment provided at Salem Hospital would be enough to keep him alive. After it was evident that my son had made it through the most precarious period of treatment, the doctors informed me that had I taken the time to drive my son to the hospital the 2-miles by myself – without the epinephrine treatment he had received in the ambulance -- he absolutely would have perished. Due to the doctors' steadfast efforts, my son survived... and I am grateful for that every day.

Since that incident, however, we have found it <u>crucial to carry two auto-injection epinephrine pens with us at all times</u>, as well as pre-measured Benadryl spoons, and a rescue inhaler. We have had numerous close calls because my son's five anaphylactic allergens do not have to be ingested to do him harm – just the residue alone on a table-top, playground equipment, or other surfaces could bring on another anaphylactic episode. There are also airborne proteins to shellfish (for example, being heated up in the microwave) that have brought on serous reactions that could lead to anaphylaxis.

Therefore, in order to ensure my son is forearmed while outside of my care, his current preschool keeps his emergency kit with him all day, every day. It remains in his classroom while he is there, and they take it with them out onto the playground and on field trips. It is critical that my son's emergency kit never be more than a few feet away from him, at all times.

When and if he comes into contact with any of his anaphylactic allergens upon starting public school this coming autumn, my son might have a 10-15 minute window, or less, for full emergency care – including the transport to Salem Hospital. If his epinephrine pens are stored in a nurse's office at the other end of his school, it would certainly mean his death. Having trained staff readily available (to include regular teachers and substitute teachers) – and having my son's medicine on hand at all times -- could absolutely mean the difference between his life or his death. I implore you to pass this bill in order to save not only his life, but the lives of all other children in Oregon with known or not-yet-identified allergies. Make the epinephrine pens readily available – don't require they be stored away in a "safe place". With anaphylaxis – it's a matter of minutes... please help teachers succeed in saving our kids' lives. Please, I beg you, pass this bill.

Thank you for considering my testimony in your decision-making. Again, I implore you to support and pass House Bill 2749.