

## **SB 1504 STAFF MEASURE SUMMARY**

### **House Committee On Health Care**

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**Prepared By:** Alexandra Kihn-Stang, LPRO Analyst

**Meeting Dates:** 2/19

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#### **WHAT THE MEASURE DOES:**

The measure allows students and school staff to administer a premeasured dose of epinephrine via auto-injector, nasal spray, or other method.

#### **Detailed Summary:**

- Defines “premeasured dose” as a fixed, precisely measured amount of the medication that is administered by auto-injector (EpiPen), intranasal device (nasal spray), or other method identified in rule by the State Board of Education.
- Permits the administration of a premeasured dose of epinephrine in schools.
- Updates criminal and civil liability for people who administer a premeasured dose of epinephrine in good faith.
- Updates educational training requirements to ensure proper administration of premeasured doses of epinephrine, including intramuscular and subcutaneous injection methods.

SENATE VOTE: Ayes, 30

#### **ISSUES DISCUSSED:**

#### **EFFECT OF AMENDMENT:**

No amendment.

#### **BACKGROUND:**

Epinephrine is a hormone and medication primarily used for emergency treatment of life-threatening allergic reactions to food, insect stings, and other substances. An immediate injection of epinephrine may be administered in response to anaphylaxis, a severe, potentially fatal allergic reaction. Epinephrine is the only life-saving treatment for anaphylaxis, and the dose depends on age and weight.

There are several delivery options available for epinephrine. Auto-injectors, which administer a premeasured dose of epinephrine, were first approved by the U.S. Food and Drug Administration (FDA) in 1987 under the name EpiPen. A generic auto-injector was made available in 2018. In 2024, the FDA [approved](#) a single-dose epinephrine nasal spray for adults and children who weigh at least 66 pounds. Additionally, epinephrine may be available in a vial, drawn into a syringe, and injected into the muscle, skin, or directly into a vein. In Oregon, trained individuals may administer auto-injectable epinephrine to someone having a severe allergic reaction when no health care provider is present. They must complete a [licensed training program](#) covering symptom recognition, common triggers, proper use, and follow-up care.