

*Testimony before the Assembly Committee on Health, Aging and Long-Term Care*

*Senator André Jacque*

*April 12, 2023*

Chairman Moses and Committee Members,

Thank you for the opportunity to testify in support of Senate Bill 7 and Assembly Bill 9 today.

Eighteen-year-old Dillon Mueller died on October 4, 2014, after he suffered a severe allergic reaction from a bee sting when no epinephrine was available in the first aid kits of either the Eagle Scout with him, or the arriving volunteer first responders.

Dillon himself was an Eagle Scout preparing to take over the family heritage farm. Had there been an epinephrine auto-injector available to counteract a simple bee sting, a fine young man with his whole life ahead of him would very likely be alive today.

Anaphylaxis occurs when someone suffers a severe and life-threatening allergic reaction, most commonly from insect stings, food items and medications. Anaphylaxis results in approximately 1,500 deaths annually, in addition to roughly 90,000 emergency department visits each year in the U.S. from food allergies alone.

Prompt recognition of signs and symptoms is crucial, as failure to administer epinephrine early in the course of treatment has been repeatedly implicated in anaphylaxis fatalities. The more rapidly anaphylaxis develops, the more likely the reaction will be severe and potentially life-threatening. Many times anaphylaxis occurs in the absence of a known allergic trigger, making legislation to allow increased access to epinephrine auto injectors that much more important. It is widely recognized that epinephrine auto-injectors are generally safe and easy to administer, even by people with no medical background.

Dillon's parents, Angel and George, have made it their mission to educate people about the importance of epinephrine and expand access and Good Samaritan protections to trained individuals and I have been honored to join them on that journey since their son's death. They have become not only advocates, but trainers themselves that have offered numerous opportunities at no cost throughout Wisconsin, and have worked tirelessly with other states to save lives so that their son's memory lives on. Even though it only became law in December 2017, "Dillon's Law" has already saved at least eight lives that we know of and has also been successfully enacted in Minnesota, Indiana, and Illinois. It is one of my proudest legislative accomplishments.

Dillon's Law 2.0, signed into law last session, further expanded the availability of epinephrine auto-injectors for individuals having a life-threatening allergic reaction. This law was a common sense expansion of the original 2017 law that will make saving lives even easier. This initiative, supported by numerous healthcare groups, expanded the original Dillon's Law with ease of use modifications requested by epinephrine administration trainers, including the Wisconsin Association of Osteopathic Physicians and Surgeons, and established the recently signed standing order for pharmacies, similar to naloxone/Narcan.

In the last few years, the technology of epinephrine injectors has expanded beyond pens and syringes, such as a wristband. These newer options can offer individuals a more efficient way to carry on their person or a cheaper alternative.

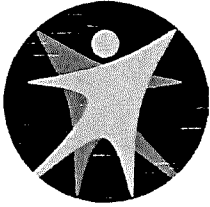
This bill, "Dillon's Law 3.0," further broadens the epinephrine statutes for pens and syringes to encompass every FDA-approved "epinephrine delivery system" to create better access to these new technologies and save more lives. I am thankful that it has bi-partisan co-sponsorship on this committee, including the Chair, and it is again supported by a broad coalition of organizations including the Allergy and Asthma Network, Wisconsin Medical Society, Wisconsin Academy of Family Physicians, Wisconsin Association of Local Health Departments and Boards, Wisconsin Association of School Nurses and the Wisconsin Public Health Association.

There is a technical amendment from myself and Rep. Sortwell simply clarifying that the epinephrine dispensed by the FDA-approved devices is pre-measured that was already adopted by the Senate, with an identical amendment to the Assembly version.

Thanks to Angel and George Mueller, Wisconsin is leading the way forward in promoting epinephrine legislation nationwide.

With "Dillon's Law," they have left an enduring legacy of life-saving legislation born from tragedy that will continue to save lives.

The Senate version of this measure, Senate Bill 7, last month passed the State Senate in a unanimous voice vote following a unanimous committee recommendation. Thank you for your consideration of Assembly Bill 9.



State of Wisconsin  
Department of Health Services

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Tony Evers, Governor  
Kirsten L. Johnson, Secretary

**TO:** Members of the Assembly Committee on Health, Aging and Long-Term Care

**FROM:** HJ Waukau, Legislative Director

**DATE:** April 12, 2023

**RE:** Assembly Bill 9 and Senate Bill 7, relating to: the possession, administration, and dispensing of epinephrine auto-injectors and prefilled syringes of epinephrine to instead include all epinephrine delivery systems.

The Wisconsin Department of Health Services (DHS) would like to thank the Committee for the opportunity to submit written testimony in support of Assembly Bill 9 (AB 9) and Senate Bill 7 (SB 7), regarding epinephrine delivery systems. Under AB 9 / SB 7 the bill broadens how epinephrine may be administered by removing the restriction of auto injector or prefilled epinephrine syringes to the generic terminology of “epinephrine delivery system.” The primary benefit of this change is the ability to adapt the delivery of needed epinephrine based on medical and technological enhancements.

2021 Wisconsin Act 218, passed last session with the support of Governor Evers and the Legislature, authorizes the use of an epinephrine prefilled syringe in the same manner as an epinephrine auto-injector in schools and other settings. After the passage of Act 218, DHS issued a statewide standing order to dispense epinephrine to persons who have completed the required training for the administration of epinephrine. Broadening statutory language to include all epinephrine delivery systems could help increase access across the state.

DHS thanks the Committee for the opportunity to provide written testimony in support of AB 9 and SB 7 and we offer ourselves as a resource for Committee members for any follow up or additional information that may be needed.



April 12, 2023

**Assembly Committee on Health, Aging, and Long-Term Care**

**Department of Public Instruction Testimony**

**2023 Assembly Bill 9**

**(Assembly Amendment 1)**

**2023 Senate Bill 7**

I want to thank Chairman Moses and members of the committee for the opportunity to give written testimony on Assembly Bill 9 (AB 9) and Senate Bill 7 (SB 7). My name is Kevyn Radcliffe, Legislative Liaison for the Department of Public Instruction.

DPI supports AB 9/SB 7, with the adoption of Assembly Amendment 1 (AA1) to AB 9/SB 7, because it will save student's lives.

Anaphylaxis is a severe, potentially life-threatening allergic reaction. It can occur within seconds or minutes of exposure to something one is allergic to, such as peanuts or bee stings. Anaphylaxis causes the immune system to release a flood of chemicals that can cause you to go into shock – blood pressure drops suddenly, and the airways narrow, blocking breathing. Signs and symptoms include a rapid, weak pulse; a skin rash; and nausea and vomiting. Common triggers include certain foods, some medications, insect venom and latex. Anaphylaxis requires an injection of epinephrine and a follow-up trip to an emergency room. If epinephrine is unavailable, the person needs to go to an emergency room immediately. If anaphylaxis isn't treated right away, it can be fatal. For our rural schools, an emergency room may be a long distance from the school. Epinephrine can be the difference between life and death.

Most often in Wisconsin, it would not be a school nurse who would be drawing up a medication. Teachers or other non-medical staff are likely to be the closest to a student experiencing Anaphylaxis and to administer epinephrine. DPI strongly recommends that *only premeasured doses of emergency epinephrine should be given by lay staff to students*. This includes autoinjector and prefilled syringes that both have premeasured amount of epinephrine. Any new delivery system would need to contain a premeasured dose.

For the reasons stated above, DPI supports AB 9/SB 7 with adoption of AA1-AB 9. If you have questions or would like additional information, please contact Kevyn Radcliffe, Legislative Liaison, at [Kevyn.radcliffe@dpi.wi.gov](mailto:Kevyn.radcliffe@dpi.wi.gov) or (608) 264-6716.