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Upon review of the proposed changes to 105 CMR 200, it is noted that one of school nurses biggest concern is the administration of Benadryl or other antihistamines in response to allergic reactions. DPH and various regional consultants have been made aware of this concern via phone calls, emails, and during meetings.

Definition form page 2 of proposed changes

**Emergency Rescue Medication means a schedule II-VI medication which is administered in the event of an allergic reaction, apparent opioid overdose, asthma or other loss of consciousness and/or acute respiratory event, in order to prevent imminent death or serious injury or illness. Examples may include but are not limited to: epinephrine, naloxone or other FDA-approved opioid antagonist, atropine, pralidoxime chloride or other designated nerve agent antidotes that are in an FDA-approved, pre-dosed form; rescue inhalers; and other medications in FDA-approved, pre-dosed forms that are administered through the mucous membranes of the nose, mouth, or lungs.**

Area of Concern

Many physician emergency action plans include the administration of Benadryl or another antihistamine. The orders we receive vary and can be written for the administration of Benadryl or other antihistamines for mild symptoms with instructions to monitor the student before epinephrine, or post epinephrine administration, or concurrent to epinephrine administration (all antihistamine administrations can only be administered by a nurse).

Nurses train teachers, coaches, bus drivers, staff, and administrators on the signs and symptoms of anaphylaxis and administration of epinephrine in the event that a school nurse is not readily available as on a field trip or sporting event. There may be times when a clinic does not have a nurse available for coverage. The training per 105 CMR 210 does not address the administration of antihistamines.

When orders are written in this manner, a nurse would need to be available at all times for all students who have a diagnosed allergy. In reality, this is not feasible. Nurses are not always readily available for all field trips, clubs, or sporting events that may occur simultaneously at all hours of the day and night therefore consideration needs to be given as to make changes to reflect reality and best practice in the school setting.

Per BORN, it is the responsibility of individual nurses and their managers to accept orders that can be realistically and reasonably implemented.

School nurses have been advised not to accept orders that can not be followed to contact individual families and physicans to explain best practices in school and have their orders reflect for when a nurse is immediately available **and** when a nurse is not immediately available. This is time consuming and has been unsuccessful in getting physicians to change their orders. The messaging needs to be greater than a school nurse’s voice.

**In the event that a nurse is not readily available, the first line of treatment should be epi🡺911.**

*Potential suggestions to resolve this:*

***Can Benadryl or other antihistamines be included in this category of emergency rescue medication if provided in pre-dosed tablet form? We do not administer antihistamines unless they are on an individual student order.***

***Can the new proposed standard AAP (shared with nurse leaders at our regional meeting on Feb 12, 2025) add text to include an acknowledgement?***

***Can this document become the standard school form? (Many practices do not want to complete “another” form).***

***\*\*\*Antihistamines may not be administered if a nurse is not immediately available at the time of medical event such as a field trip or other outside-of-school activity. Treatment will be epinephrine administration and 911.***

***The proposed changes to the “Standard AAP” read to give antihistamines if prescribed, without this being addressed school nurses are in this same situation and these changes have not addressed this major issue school nurses face for when a nurse is not readily available***

***The rationale is that nurses provide training on epinephrine administration for times for when a nurse is not immediately available. If this is not addressed, nurses would be expected to be available for every allergic student who has Benadryl or an antihistamine written in their orders.***