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**SB 328 Permitting a pharmacist to distribute pre-measured doses of epinephrine to a school for emergency medication kits.**

**Proponent In Person**

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**Chairperson Gossage and Members of the Committee:**

Thank you for the opportunity to provide proponent testimony on behalf of the **Kansas School Nurses Organization (KSNO)**. We stand in strong support of **SB 328**.

This bill takes a critical step for student safety by updating existing Kansas law to replace the restrictive term "epinephrine auto-injector" with the broader, inclusive language of "**epinephrine delivery system**." This simple but profound change allows Kansas schools to utilize *any* FDA-approved life-saving medication for anaphylaxis, rather than being legally tied to a specific device that is becoming outdated.

### **Why This Change is Urgent**

**1. Keeping Kansas Law Aligned with Medical Science** Science moves faster than statutes. The FDA has now approved **Neffy**, the first needle-free epinephrine nasal spray.

- Under current law, Kansas schools are technically prohibited from stocking this FDA-approved option simply because it is a spray, not an "auto-injector."
- **SB 328** fixes this by focusing the law on the *medication* (epinephrine) rather than the mechanism. This "future-proofs" our schools against needing to return to the legislature every time medical technology advances.

**2. Removing Barriers for Lay Responders** School nurses are not always the first to arrive at a medical emergency. Often, a teacher, coach, or bus driver must act in seconds.

- **Needle Phobia:** Lay responders often hesitate to use auto-injectors due to fear of needles or fear of hurting the child. A nasal spray option significantly lowers this psychological barrier, increasing the likelihood that life-saving aid is administered immediately.
- **Ease of Use:** Recent data confirms that untrained individuals can administer nasal epinephrine with high reliability.

**3. Supply Chain and Budget Protection** Schools have historically faced nationwide shortages and skyrocketing prices for EpiPens® and generic auto-injectors.

- By broadening the definition to "epinephrine delivery system," SB 328 fosters competition. It allows districts to purchase whatever product is available and affordable—whether that is an auto-injector or a nasal spray.
- Restricting the law to "auto-injectors" unintentionally creates a monopoly that hurts school district budgets.

**4. Durability in Rural Kansas** Auto-injectors are sensitive to temperature and can degrade if left in hot vehicles or cold storage. Newer non-injectable delivery systems have demonstrated higher stability (freeze/thaw tolerance), which is vital for rural districts where medications may need to be carried on long bus routes during Kansas's extreme weather seasons.

### **Alignment with Other States**

Passage of SB 328 would place Kansas among the leaders in modernizing school health safety, aligning us with states that have recently updated their laws to include new delivery technologies:

- **Ohio:** Recently passed legislation (HB 462) specifically to include nasal spray epinephrine in schools.
- **Missouri:** Currently advancing similar legislation (HB 1826 / SB 1260) to change "auto-injector" to "epinephrine delivery device."
- **Texas:** Updating statutes (SB 1619) to replace "auto-injector" with "delivery device" to lower costs and increase access.
- **New York & Washington:** Allow schools to stock "epinephrine delivery devices," ensuring they are not restricted to needles only.

### **Conclusion**

**SB 328 is a common-sense update.** It costs the state nothing, but it grants local school districts the flexibility to choose the most effective, affordable, and user-friendly tools to save a child's life.

The Kansas School Nurses Organization urges the Committee to pass SB 328 favorably to ensure that when a student has a life threatening allergic reaction, school staff have the best treatments available to help them.

Thank you for your dedication to the health and safety of Kansas students.

Respectfully,

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Kansas School Nurses Organization Legislative Chair

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## References

1. **FDA Approval:** FDA News Release. "FDA Approves First Nasal Spray for Treatment of Anaphylaxis" (August 9, 2024).
2. **Missouri Legislature:** *HB 1826 / SB 1260 - Modifies provisions relating to the administration of epinephrine.* (2025-2026 Session).
3. **Ohio Legislature:** *House Bill 462 - Regards epinephrine in schools.* (Passed House Nov 2024).
4. **Texas Legislature:** *SB 1619 - Relating to the maintenance and administration of epinephrine delivery devices.* (89th Legislature).
5. **Clinical Data:** *Umasunthar T, et al. "Incidence of fatal food anaphylaxis in people with food allergy." Clinical & Experimental Allergy.*