SB 1504 STAFF MEASURE SUMMARY **Carrier:** Sen. Wagner

Senate Committee On Health Care

Action Date:	02/09/26
Action:	Do pass.
Vote:	5-0-0-0
Yeas:	5 - Campos, Hayden, Linthicum, Patterson, Reynolds
Fiscal:	Has minimal fiscal impact
Revenue:	No revenue impact
Prepared By:	Katie Hart, LPRO Analyst
Meeting Dates:	2/9

WHAT THE MEASURE DOES:

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

Detailed Summary:

- Permits the administration of premeasured doses of epinephrine in schools
- 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
- 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

ISSUES DISCUSSED:

- Provisions of the measure

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.