



## Frequently Asked Questions: Required Epinephrine Auto-Injectors in Child Care Programs

### What is an epinephrine auto-injector?

An epinephrine auto-injector is a medical device used to give a person epinephrine, also called adrenaline. Epinephrine is used to quickly treat a severe allergic reaction, or anaphylaxis. Allergies to certain foods, insect stings, latex or some medications may cause a severe allergic reaction.

### What is the epinephrine auto-injector requirement for child care programs?

All child care programs regulated by Articles 47 and 43 of the New York City Health Code must keep at least two unexpired epinephrine auto-injectors with retractable needles on-site. These auto-injectors must be dosed for children. This requirement applies to all child care programs regulated by Articles 43 and 47 of the Health Code, including those programs that choose not to give other medicines.

At least one staff person trained in using the auto-injector must be on-site whenever children are present.

### How can my staff receive the epinephrine auto-injector training?

New York State-approved trainings are available in-person and online. To find a list of approved **in-person trainers**, visit the [Professional Development Program: Early Childhood Education and Training Program](#) website. Once on the site, check the medication administration training (MAT) box and select your county. Contact one of the listed MAT trainers to request the following in-person training course: “Emergency Medication Administration Overview Including Stock Epinephrine Auto Injector.” Additional approved in-person trainers can be found at [The Aspire Registry](#), part of New York Works for Children.

The following organizations offer **online training**:

- [Code Ana: Epinephrine Auto-Injector Training](#)
- [The American Red Cross: Anaphylaxis and Epinephrine Auto-Injector Online Course](#)
- [American Heart Association Heartsaver Pediatric First Aid CPR AED Online](#)
- [Managing Allergies and Anaphylaxis at School Training for Unlicensed School Personnel Webinar](#) (Valid only if signed by a health care practitioner recognized by school administration)

Staff who are health care providers, such as school nurses, do not need to receive this training; they can provide their New York State professional license number as proof of training.



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## What information is included in the training?

The training includes information on:

- The signs and symptoms of severe allergic reactions, including anaphylaxis
- The recommended dosage of epinephrine for adults and children
- How to store and administer the epinephrine auto-injector
- What to do after giving a dose of epinephrine

This training is different from medication administration training (MAT). MAT certification is not required to give epinephrine, and in New York State, having a MAT certification does not count as epinephrine auto-injector training.

## Where can my program get epinephrine auto-injectors?

The Health Department will give two auto-injectors to each group child care and school-based child care program that emails their training certificate and organization number (DCID) to [autoinjector@health.nyc.gov](mailto:autoinjector@health.nyc.gov). If there is more than one program at a location, each permitted program must submit proof of training.

The Health Department recommends that at least two staff members receive training. Staff who are health care providers, such as school nurses, may provide their New York State professional license number as proof of training; these staff do not need to receive this training.

Once proof of training is received, the Health Department will mail the auto-injectors to the address listed on the permit.

Child care programs can also get epinephrine auto-injectors at a pharmacy. For the pharmacist to dispense the auto-injectors, your program must provide a copy of the child care permit and training completion certificates. The training completion certificates must specify epinephrine auto-injector training by Code Ana, the American Red Cross or the American Heart Association.

## Where should I store the epinephrine auto-injectors?

Auto-injectors must be easily accessible to trained staff members in case of an emergency. Store auto-injectors in an area that children *cannot* access. Choose at least one staff person to be responsible for storing, maintaining and disposing of the auto-injectors, and making sure they have not expired.

## What should I do if the class goes on a field trip?

The two required epinephrine auto-injectors must remain at your program site. However, any auto-injector that is prescribed for an individual child should accompany the child on a field trip.



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### **Can parents provide their own epinephrine auto-injectors for their children?**

Yes, parents or guardians can supply their own epinephrine auto-injector, but they must provide written consent and medical authorization and must train staff in its use.

### **Can an epinephrine auto-injector be given to a child with no previous history of severe allergic reaction?**

Yes. Trained staff members can give epinephrine to a child with symptoms of anaphylaxis even if there is no prior history of severe allergic reaction.

### **What should staff do after giving a dose of epinephrine?**

- Call 911 for emergency medical care, even if the child’s symptoms improve, and notify the child’s parent or guardian.
- Give the used auto-injector to the emergency responders.
- Report the incident to the Health Department at 646-632-6100 within 24 hours of administering epinephrine.
- Record the incident in your program’s log for recording illnesses, accidents and injuries. The incident log must be available to the Health Department if requested. The logged entry must include:
  - The child’s name and date of birth
  - The date and time of the incident
  - The names and positions of staff and other adults present at the time of the incident
  - A description of the incident and follow-up procedures

### **Does our written safety plan need to include the epinephrine auto-injector requirement?**

Yes, your written safety plan must include the following information on auto-injectors:

- Storage location
- Procedures for ensuring the auto-injectors have not expired
- The names and titles of the staff members responsible for storing, maintaining and disposing of the auto-injectors

### **How does the Health Department enforce this requirement?**

The Health Department may issue violations subject to fines to child care programs that do *not* meet these requirements:

- Have two unexpired epinephrine auto-injectors on site
- Store the auto-injectors in a location easily accessible to staff but out of reach of children
- Have proof that staff have been trained in the use of the epinephrine auto-injector
- Comply with the program’s written safety plan

### **What medical documentation is required for children in care?**

The program must have an up-to-date medical statement on file for each child in care. For a child with identified allergies or with special health care needs, the program must have an individual health care plan developed by the child’s parents and health care provider. Parents must make program staff aware



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of the individual health care plan on their child’s first day at the program.

**Are there other program requirements to giving medicine other than epinephrine?**

All staff can administer over-the-counter topical ointments, lotions, creams and sprays, including sunscreen lotion and insect repellent, with parental consent.

To give other medicines, staff need to complete the Office of Children and Family Services (OCFS)-approved medication administration training (MAT). MAT instructs participants in handling, administering, storing and disposing of over-the-counter and prescription medicines safely; discusses permission and instruction requirements; provides information about medical conditions, such as allergies and asthma; and provides guidance in handling emergency situations.

Once staff are MAT-certified, their child care program must work with a health care consultant to develop a safety and health care plan. After the consultant signs off on the plan, the program must submit it to their [child care borough office](#) for processing.



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