

Delegate Anne R. Kaiser, *Chair*  
Delegate Alonzo T. Washington, *Vice Chair*  
Ways and Means Committee

Testimony by Ben Wormser, M.D.

Wednesday, February 3, 2021

Support for H.B. 0609 – Public and Nonpublic Schools - Bronchodilator Availability and Use - Policy  
(Bronchodilator Rescue Inhaler Law)

I am writing today in strong support of H.B. 0609, which would require each county board of education to establish a policy that allows schools to stock bronchodilators, such as albuterol sulfate, and to train staff members to administer the medication with a spacer in the event of an emergency asthma attack. I am a general pediatrician in Baltimore, MD and have treated asthma in both a general pediatrics clinic and a local school-based health center. Asthma is one of the most common diagnoses that affect my patients and I believe that this bill will fill an important gap in their safety at school.

Asthma attacks have a variety of causes, which include exercise, colds, and exposure to environmental allergens such as mold, pollen, and insects. Asthma attacks happen to children who have a long history of asthma and to children who have never been diagnosed with asthma, because a history of asthma symptoms is usually necessary to make the diagnosis. When asthma attacks do occur, inhaled albuterol sulfate is a life-saving medication that can temporarily, and sometimes definitively, improve symptoms. In this regard, it has a similar life-saving potential to Naloxone (Narcan), auto-injectable epinephrine (Epipens), and Automated External Defibrillators (AEDs). Albuterol is very safe to use and does not cause harm to the patient, even when used in the absence of an asthma attack (such as a misdiagnosis).

In order to be eligible to use this life-saving medication in Maryland schools, we currently require students to submit an albuterol inhaler and a form that is signed by both their physician and their parent/legal guardian confirming their asthma diagnosis. This must be done at the beginning of each academic year for every patient with a diagnosis of asthma. I have seen the barriers to accomplishing this task on both the school and pediatric practice sides of the process and can attest that the rate of receiving both the medication and the form is low. A 2018 survey of 120 school nurses in Chicago Public Schools found that 86% of them identified a lack of medications as one of the primary barriers to asthma care (Pappalardo AA, 2019). Currently, if a child who has not submitted both their inhaler and their signed form has an asthma attack in school, they are not allowed to receive any albuterol until Emergency Medical Services (EMS) arrive at the school. This can be a dangerous delay in care for the student and a costly burden on the entity that pays to deploy the ambulance.

H.B. 0609 ensures that albuterol and an appropriate delivery device are available in every Maryland school whenever a student needs them. It also ensures that an appropriate individual has been trained to administer the medication correctly. This is an effective, safe, cost-friendly method of keeping our children safe at school. Thank you for the opportunity to testify.

Reference: Pappalardo AA, Paulson A, Bruscato R, Thomas L, Minier M, Martin MA. Chicago Public School nurses examine barriers to school asthma care coordination. *Public Health Nursing*. 2019 Jan;36(1):36-44.