Micaela Fritz
Nurse Practitioner
Johns Hopkins Hospital
Department of Pediatrics- Pediatric Complex Care
1800 Orleans Street
Baltimore, Maryland 21287
(410) 955-5000

## Testimony for House Bill 0384 April 4, 2022

## Public and Nonpublic Schools – Bronchodilator Availability and Use – Policy (Bronchodilator Rescue Inhaler Law)

Dear Chair Pinsky, Vice-chair Kagan, and members of the Education, Health, and Environmental Affairs Committee:

Thank you for the opportunity to provide this testimony. My name is Micaela Fritz, and I am a pediatric nurse practitioner at Johns Hopkins Hopkins Hopkins Hopkins Prior to my role as a nurse practitioner at Johns Hopkins Children's Center, I was a school nurse for Howard County Public School System through December 2021. I am testifying today in support of this bill that would provide emergency albuterol in schools.

I would like to note that the views expressed here are my own and do not necessarily reflect the policies or positions of my employer, Johns Hopkins Hospital.

In my previous experience as a school nurse, I was responsible for the medical care of over 800 middle school students at a public school. Many of the students I cared for had chronic medical conditions, including asthma. Parents were required to submit an emergency preparedness form and any medications a student may require at the beginning of the school year. However, oftentimes parents would either forget to submit this information or more often, simply send their child to school with their medication in their backpack without providing the school with medication or submitting the proper paperwork for the school to be able to provide the medication.

If a student was caught with a medication (such as albuterol) that did not have appropriate documentation, the medication would be confiscated and held until the parent came to pick the student up. Even if the student had an asthma attack, I would not be allowed to administer the medication they had on hand. Instead, I would be required to dial 911 and expected to wait. This would lead to a delay in care, exacerbation of symptoms and without treatment with albuterol, even death may occur.

I had an incident this past fall where a student who was a known asthmatic needed albuterol. He was sent to the health room for a cough and was noted to have bilateral wheezing on exam- there was no question that this was an asthma attack. I administered albuterol as prescribed, his cough subsided and he returned to class. Approximately 4 hours later, he returned with audible wheezing and a violent cough that caused him to vomit continuously. I tried to administer his albuterol inhaler again, however, the pump (which was not empty), stopped working. There seemed to be something wrong with the device. The student had an

extra albuterol inhaler in his pocket that his mom had given him that morning. Under the guidelines, I should have confiscated this medication and not allowed him to use it. Instead, he self-administered the albuterol from home and 911 was called. Fortunately- the medicine helped. By the time EMS arrived, his vomiting and wheezing had subsided.

This experience had a profound impact on me professionally and personally. I was thankful that his mother had enough foresight to have him carry another albuterol inhaler just in case, even though he was not supposed to have it. The implications for what would have happened to this student are vast. What would have helped me in this case would be a law like this one. Not only would I have had my own albuterol inhaler supply, I would have had permission to use it in emergency situations. Some nurses in my shoes who have done something similar have lost their jobs. Fortunately, I did not, and medically, I know it was the right thing to do. Now imagine a scenario where the child didn't have a backup inhaler in his pocket- I am not sure what would have happened, but the situation could have been dire, even life-threatening to the student. This is actually quite a scary thing to consider for this child, who could have had a bad outcome, and for healthcare professionals like myself, working in a school environment and knowing they may not have access to a common lifesaving drug when we need to use it.

I strongly urge you to consider supporting this bill, which will help to ensure that all children with asthma have access to life-saving medication at school. Thank you.