August 10, 2022

Dear Provider,

On June 9, 2022, OCFS sent a letter with important reminders about caring for children with diagnosed allergies. Today we are reaching out to share new information that provides the opportunity to protect the lives of people without a diagnosed allergy who may experience anaphylaxis while in your child care program.

We are thrilled to announce that the OCFS non-patient specific epinephrine auto injector initiative is expanding to include all three doses of epinephrine! This means any licensed/registered child care program who successfully completes the required training may receive a package containing two non-patient specific auto injectors and one training device for each of the following:

- **Infants & Toddlers (generally up to age 3)** = 0.1mg dose (16.5lbs to 33lbs)
- **Child (generally ages 3 years-8 years)** = 0.15mg dose (33lbs-66lbs)
- **Older Child /Adult (generally persons over 8 years)** = 0.30mg dose (over 66lbs)

To take advantage of this opportunity, follow these easy steps:

- Designate at least one individual per program who will successfully complete an approved epinephrine training course. The OCFS auto injector initiative is now a fully automated, paperless process. During the "Identifying and Responding to Anaphylaxis" training course, the participant is asked twice to respond "yes" or "no" about participating in the auto injector initiative. When the individual completing the training clicks "yes", the auto injector package(s) will be shipped directly to the child care program. **The system will automatically default to select all three injectors.** If you are only interested in receiving certain sizes, you must de-select the sizes you do not want to receive. As a reminder, Public Health Law allows a trained individual to administer epinephrine to all persons in a child care program appearing to experience anaphylactic symptoms. This means even adults (staff, parents, etc.) who exhibit signs of anaphylaxis can receive the stock non-patient specific auto injector(s). Child care programs are strongly encouraged to stock all available doses of epinephrine. However, epinephrine is not recommended for children weighing less than 16.5 pounds. If a child under 16.5 pounds shows signs of anaphylaxis, call 911 immediately.

- Record each individual who has successfully completed the approved epinephrine course on Appendix H of the Health Care Plan (HCP).
- Update the HCP to indicate the program is stocking non-patient specific auto injector.
- Update Appendix J of the HCP. Submit the revised HCP to your regulator.
- **If your program is already participating in the auto injector initiative**—thank you! In an effort to prevent you from having to re-take the training to obtain the additional auto injectors, soon a temporary link will be sent to the email address the designated person used to request the initial auto injector. The designated person will have until September 15, 2022 to click on the link and request the two additional doses. After September 15, 2022, the link will expire, and the program will need to go to: https://www.ecetp.pdp.albany.edu/mytraining/guest/Login.aspx, successfully complete the training, and request the additional auto injectors.
Public Health Law has allowed child care programs to stock non-patient specific auto injectors since March 28, 2017. Programs reported to OCFS that stocking epinephrine has presented three major challenges:

1. The required training was lengthy, in-person, and has a cost associated with it.
2. Each dose of epinephrine costs hundreds of dollars so stocking it is cost prohibitive.
3. Providers are unable to find a physician to write the required non-patient specific prescription.

OCFS heard these concerns and has eliminated the barriers by:
1. Creating a 1.5-hour on-line training at no cost to the participant.
2. Covering the cost of the auto injector(s).
3. Obtaining a non-patient specific prescription for all licensed/registered child care programs in NYS.

With the barriers removed, now is the time to take advantage of this life-saving opportunity. Remember: epinephrine is a safe medication. It is the first line drug of choice for the emergency treatment of severe allergic reactions. There is no medical reason for a trained staff to withhold administration of an epinephrine auto injector when anaphylaxis is suspected. However, a delay in the administration could result in death. As you know, Elijah Silvera experienced anaphylaxis and died when he was fed a grilled cheese sandwich in his child care program. The program did not administer his auto injector. We cannot stress enough the value of having this life saving medication in your emergency tool kit, and how important it is that all caregivers know what to do in the event of an anaphylactic emergency.

"Identifying and Responding to Anaphylaxis " is available in English and Spanish and can be found at: [https://www.ecetp.pdp.albany.edu/mytraining/guest/Login.aspx](https://www.ecetp.pdp.albany.edu/mytraining/guest/Login.aspx)

For more information about the prevention of anaphylaxis and the response during an anaphylaxis emergency in a child care program, please refer to Anaphylaxis Policy for Child Day Care Programs on our website, [https://ocfs.ny.gov/programs/childcare/policies/](https://ocfs.ny.gov/programs/childcare/policies/).

There is no way to predict when a person will experience an allergic reaction. Proper preparation is key! Thank you for your commitment to ensuring your child care program is as prepared as possible to respond to an anaphylaxis emergency.

Sincerely,

Nora K. Yates
Acting Deputy Commissioner
Division of Child Care Services