

**First Regular Session
Sixty-seventh General Assembly
STATE OF COLORADO**

PREAMENDED

*This Unofficial Version Includes Committee
Amendments Not Yet Adopted on Second Reading*

LLS NO. 09-0851.01 Richard Sweetman

SENATE BILL 09-226

SENATE SPONSORSHIP

Sandoval,

HOUSE SPONSORSHIP

Gagliardi,

Senate Committees

Health and Human Services
Appropriations

House Committees

Education

A BILL FOR AN ACT

101 **CONCERNING POLICIES FOR THE MANAGEMENT OF FOOD ALLERGIES**
102 **AMONG SCHOOL CHILDREN, AND MAKING AN APPROPRIATION IN**
103 **CONNECTION THEREWITH.**

Bill Summary

(Note: This summary applies to this bill as introduced and does not necessarily reflect any amendments that may be subsequently adopted.)

Requires the state board of education (state board) to promulgate rules establishing a policy for the management of food allergies and anaphylaxis among students enrolled in schools of school districts and institute charter schools (statewide policy). Requires the state board to consult with the department of public health and environment (department) in adopting the statewide policy. Specifies mandatory

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.
*Capital letters indicate new material to be added to existing statute.
Dashes through the words indicate deletions from existing statute.*

SENATE
3rd Reading Unamended
April 20, 2009

SENATE
Amended 2nd Reading
April 17, 2009

provisions for the statewide policy.

Requires each school district to adopt a policy for the management of food allergies and anaphylaxis among children in schools of the school district. Requires each school district policy to include provisions that satisfy the requirements of the statewide policy. Requires each school district to ensure that each school of the school district makes available self-injectable epinephrine for the purpose of providing emergency medical treatment in the event that a student or other person suffers anaphylaxis as a result of an allergic reaction to food.

Requires the state charter school institute to adopt a policy for the management of food allergies and anaphylaxis among children in institute charter schools. Requires the institute charter school policy to include provisions that satisfy the requirements of the statewide policy. Requires the state charter school institute to ensure that each institute charter school makes available self-injectable epinephrine for the purpose of providing emergency medical treatment in the event that a student or other person suffers anaphylaxis as a result of an allergic reaction to food.

Requires the department to consult with the state board concerning the adoption of the statewide policy. Requires the department to develop, maintain, and make available to school districts and institute charter schools a standard form to be used by school districts to gather information from physicians and parents and guardians of students concerning students' risk of food allergies and anaphylaxis and the treatment thereof.

1 *Be it enacted by the General Assembly of the State of Colorado:*

2 **SECTION 1. Legislative declaration.** (1) The general assembly
3 hereby finds and declares that:

4 (a) Food allergies are a growing public health concern in the
5 United States, especially among children;

6 (b) From 1997 to 2002, the incidence of reported food allergies
7 among children less than eighteen years of age increased eighteen
8 percent, and at least one study has shown that the incidence of peanut
9 allergies among children less than eighteen years of age has doubled in
10 this time;

11 (c) In a recent survey of four hundred elementary school nurses,

1 nearly half of them reported that the number of children with food
2 allergies in their schools had increased during a recent five-year period;

3 (d) Recent studies indicate that hospitalizations resulting in food
4 allergy diagnoses for children have increased, and from 2004 to 2006,
5 there was an average of 9,537 hospital discharges in the United States
6 each year that included a diagnosis of a food allergy for a child less than
7 eighteen years of age;

8 (e) Allergies to milk, eggs, fish, shellfish, tree nuts, peanuts,
9 wheat, and soy account for ninety percent of all allergic reactions to food;
10 and

11 (f) There is no known cure for a food allergy, and strict avoidance
12 of an offending food is the only known way to prevent an allergic
13 reaction.

14 (2) The general assembly further finds and declares that:

15 (a) Anaphylaxis is a systemic allergic reaction that is rapid in
16 onset and can kill a person within minutes;

17 (b) Food allergies are the leading cause of anaphylaxis outside of
18 hospital settings, accounting for approximately one-third of all instances
19 of anaphylaxis;

20 (c) Anaphylaxis attacks resulting from food allergies cause an
21 estimated fifty thousand emergency room visits, two thousand
22 hospitalizations, and between one hundred fifty and two hundred deaths
23 in the United States each year; and

24 (d) Studies clearly show that many fatalities resulting from
25 anaphylaxis are associated with a failure to administer epinephrine, a
26 delay in the administration of epinephrine, or a failure to recognize the
27 symptoms of anaphylaxis.

1 (3) The general assembly further finds and declares that the
2 importance of managing life-threatening food allergies has been
3 recognized by the American medical association; the American academy
4 of pediatrics; the American academy of allergy, asthma, and immunology;
5 the American college of allergy, asthma, and immunology; the national
6 association of elementary school principals; the national school boards
7 association; and the national association of school nurses.

8 (4) Now, therefore, the general assembly hereby declares that the
9 state board of education and the department of public health and
10 environment should develop a policy to manage the risks posed by food
11 allergies and anaphylaxis in public schools.

12 **SECTION 2.** Part 1 of article 2 of title 22, Colorado Revised
13 Statutes, is amended BY THE ADDITION OF A NEW SECTION to
14 read:

15 **22-2-135. Food allergy and anaphylaxis management policy -**
16 **rules - approval of treatment plans.** (1) THIS SECTION SHALL BE
17 KNOWN AND MAY BE CITED AS THE "COLORADO SCHOOL CHILDREN'S
18 FOOD ALLERGY AND ANAPHYLAXIS MANAGEMENT POLICY ACT".

19 (2) AS USED IN THIS SECTION, UNLESS THE CONTEXT OTHERWISE
20 REQUIRES, "APPROPRIATE STAFF" MEANS EMPLOYEES OF A SCHOOL WHOM
21 THE PRINCIPAL OR EQUIVALENT EXECUTIVE IN CONSULTATION WITH THE
22 SCHOOL NURSE OF THE SCHOOL DETERMINES TO BE APPROPRIATE
23 RECIPIENTS OF EMERGENCY ANAPHYLAXIS TREATMENT TRAINING, WHICH
24 EMPLOYEES SHALL INCLUDE, BUT NEED NOT BE LIMITED TO, EMPLOYEES
25 WHO ARE DIRECTLY INVOLVED DURING THE SCHOOL DAY WITH A STUDENT
26 WHO HAS A KNOWN FOOD ALLERGY.

27

1 (3) ON OR BEFORE JANUARY 1, 2010, THE STATE BOARD OF
2 EDUCATION, IN CONSULTATION WITH THE DEPARTMENT OF PUBLIC HEALTH
3 AND ENVIRONMENT, SHALL PROMULGATE RULES ESTABLISHING A
4 STATEWIDE POLICY FOR THE MANAGEMENT OF FOOD ALLERGIES AND
5 ANAPHYLAXIS AMONG STUDENTS ENROLLED IN THE PUBLIC SCHOOLS IN
6 THE STATE. THE STATEWIDE POLICY SHALL INCLUDE, BUT NEED NOT BE
7 LIMITED TO, THE FOLLOWING:

8 (a) (I) A REQUIREMENT THAT, PRIOR TO THE BEGINNING OF EACH
9 SCHOOL YEAR, EACH SCHOOL DISTRICT NOTIFY A PARENT OR LEGAL
10 GUARDIAN OF EACH STUDENT ENROLLED IN A SCHOOL OF THE SCHOOL
11 DISTRICT OF THE SCHOOL DISTRICT'S POLICY CONCERNING THE
12 MANAGEMENT OF FOOD ALLERGIES AND ANAPHYLAXIS AMONG CHILDREN
13 IN SCHOOLS OF THE SCHOOL DISTRICT, WHICH POLICY SHALL BE ADOPTED
14 BY THE SCHOOL DISTRICT PURSUANT TO SECTION 22-32-139; AND

15 (II) A REQUIREMENT THAT, PRIOR TO THE BEGINNING OF EACH
16 SCHOOL YEAR, EACH INSTITUTE CHARTER SCHOOL NOTIFY A PARENT OR
17 LEGAL GUARDIAN OF EACH STUDENT ENROLLED IN THE INSTITUTE
18 CHARTER SCHOOL OF THE STATE CHARTER SCHOOL INSTITUTE'S POLICY
19 CONCERNING THE MANAGEMENT OF FOOD ALLERGIES AND ANAPHYLAXIS
20 AMONG CHILDREN IN INSTITUTE CHARTER SCHOOLS, WHICH POLICY SHALL
21 BE ADOPTED BY THE STATE CHARTER SCHOOL INSTITUTE PURSUANT TO
22 SECTION 22-30.5-518;

23 (b) A REQUIREMENT THAT THE NOTIFICATION REQUIRED BY
24 PARAGRAPH (a) OF THIS SUBSECTION (3) INCLUDE THE STANDARD FORM
25 DEVELOPED BY THE DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT
26 PURSUANT TO SECTION 25-1.5-109, C.R.S., TO ALLOW EACH PARENT OR
27 LEGAL GUARDIAN OF A STUDENT WITH A KNOWN FOOD ALLERGY TO

1 PROVIDE THE FOLLOWING INFORMATION TO THE SCHOOL'S
2 ADMINISTRATION:

3 (I) DOCUMENTATION REGARDING THE DIAGNOSIS AND HISTORY OF
4 THE STUDENT'S FOOD ALLERGY;

5 (II) IDENTIFICATION OF ALL FOODS TO WHICH THE STUDENT IS
6 KNOWN TO BE ALLERGIC;

7 (III) IDENTIFICATION OF ANY MEDICATION THAT HAS BEEN
8 PRESCRIBED FOR THE STUDENT FOR THE TREATMENT OF A FOOD ALLERGY
9 OR ANAPHYLAXIS;

10 (IV) ANY SPECIFIC SIGNS OR SYMPTOMS THAT MAY INDICATE THE
11 STUDENT IS HAVING AN ALLERGIC REACTION TO A FOOD;

12 (V) EMERGENCY TREATMENT PROCEDURES TO EMPLOY IN THE
13 EVENT THAT THE STUDENT SUFFERS AN ALLERGIC REACTION TO FOOD; AND

14 (VI) THE NAME, PHONE NUMBER, AND SIGNATURE OF THE
15 STUDENT'S PRIMARY HEALTH CARE PROVIDER.

16 (c) A REQUIREMENT THAT THE NOTIFICATION REQUIRED BY
17 PARAGRAPH (a) OF THIS SUBSECTION (3) SHALL ENCOURAGE EACH PARENT
18 OR LEGAL GUARDIAN OF A STUDENT WITH A KNOWN FOOD ALLERGY TO
19 PROVIDE THE NAMES AND TELEPHONE NUMBERS OF PERSONS WHOM THE
20 SCHOOL SHOULD CONTACT IN ADDITION TO EMERGENCY MEDICAL
21 PERSONNEL IN THE EVENT THAT THE STUDENT SUFFERS AN ALLERGIC
22 REACTION TO FOOD;

23 (d) A REQUIREMENT THAT THE NOTIFICATION REQUIRED BY
24 PARAGRAPH (a) OF THIS SUBSECTION (3) SHALL INCLUDE LANGUAGE THAT
25 ENCOURAGES PARENTS AND LEGAL GUARDIANS OF STUDENTS FOR WHOM
26 MEDICATION HAS BEEN PRESCRIBED FOR TREATMENT OF A FOOD ALLERGY
27 OR ANAPHYLAXIS TO GIVE TO THE SCHOOL NURSE OR OTHER

1 ADMINISTRATOR OF THE STUDENT'S SCHOOL A SUPPLY OF THE MEDICATION
2 UNLESS THE STUDENT HAS AN APPROVED TREATMENT PLAN PURSUANT TO
3 SECTION 22-1-119.5 OR SUBSECTION (4) OF THIS SECTION THAT
4 AUTHORIZES THE STUDENT TO SELF-ADMINISTER THE MEDICATION.

5 (e) REASONABLE ACCOMMODATIONS FOR COMMUNICATION
6 BETWEEN THE SCHOOL AND EMERGENCY MEDICAL SERVICES, INCLUDING
7 INSTRUCTIONS FOR EMERGENCY MEDICAL RESPONDERS;

8 (f) STRATEGIES TO REDUCE THE RISK OF STUDENTS' EXPOSURE TO
9 AGENTS THAT MAY CAUSE ANAPHYLAXIS, INCLUDING BUT NOT LIMITED TO
10 EXPOSURE THAT MAY OCCUR IN CLASSROOMS, CAFETERIAS, AND COMMON
11 AREAS AND DURING EXTRACURRICULAR ACTIVITIES, FIELD TRIPS,
12 SCHOOL-SPONSORED PROGRAMS OCCURRING BEFORE AND AFTER REGULAR
13 SCHOOL HOURS, AND OTHER SCHOOL-SPONSORED PROGRAMS;

14 (g) THE PROVISION OF EMERGENCY ANAPHYLAXIS TREATMENT
15 TRAINING FOR APPROPRIATE STAFF TO PREPARE THEM TO RESPOND
16 APPROPRIATELY IN THE EVENT THAT A STUDENT SUFFERS ANAPHYLAXIS AS
17 A RESULT OF AN ALLERGIC REACTION TO FOOD, WHICH TRAINING SHALL
18 INCLUDE BUT NEED NOT BE LIMITED TO TRAINING IN THE ADMINISTRATION
19 OF SELF-INJECTABLE EPINEPHRINE; AND

20 (h) PROCEDURES TO ENSURE THE AVAILABILITY OF A STUDENT'S
21 SELF-INJECTABLE EPINEPHRINE TO FACULTY AND ADMINISTRATIVE STAFF
22 OF THE SCHOOL IN THE EVENT THAT A STUDENT SUFFERS ANAPHYLAXIS
23 AND REQUIRES EMERGENCY MEDICAL TREATMENT.

24 (4) (a) A STUDENT WITH A KNOWN FOOD ALLERGY MAY POSSESS
25 AND SELF-ADMINISTER MEDICATION TO TREAT THE STUDENT'S FOOD
26 ALLERGY IF THE STUDENT HAS A TREATMENT PLAN APPROVED PURSUANT
27 TO THIS SUBSECTION (4).

1 (b) A PUBLIC SCHOOL SHALL, AND A NONPUBLIC SCHOOL IS
2 ENCOURAGED TO, APPROVE A TREATMENT PLAN FOR A STUDENT ENROLLED
3 IN THE SCHOOL TO POSSESS AND SELF-ADMINISTER MEDICATION FOR A
4 FOOD ALLERGY IF ALL OF THE FOLLOWING CONDITIONS ARE MET:

5 (I) A HEALTH CARE PRACTITIONER HAS PRESCRIBED MEDICATION
6 FOR THE STUDENT TO USE DURING SCHOOL HOURS, AT SCHOOL-SPONSORED
7 ACTIVITIES, AND WHILE IN TRANSIT TO OR FROM SCHOOL OR
8 SCHOOL-SPONSORED ACTIVITIES AND HAS INSTRUCTED THE STUDENT IN
9 THE CORRECT AND RESPONSIBLE USE OF THE MEDICATION;

10 (II) THE STUDENT DEMONSTRATES TO AN APPROPRIATE SCHOOL
11 ADMINISTRATOR, THE HEALTH CARE PRACTITIONER OR THE HEALTH CARE
12 PRACTITIONER'S DESIGNEE, AND THE SCHOOL NURSE THE SKILL LEVEL
13 NECESSARY TO USE THE MEDICATION AND ANY DEVICE THAT IS NECESSARY
14 TO ADMINISTER THE MEDICATION AS PRESCRIBED;

15 (III) THE SCHOOL NURSE, AN APPROPRIATE SCHOOL
16 ADMINISTRATOR, THE STUDENT'S PARENT OR LEGAL GUARDIAN, AND THE
17 HEALTH CARE PRACTITIONER COLLABORATE TO FORMULATE A WRITTEN
18 TREATMENT PLAN FOR MANAGING FOOD ALLERGY EPISODES OF THE
19 STUDENT AND FOR MEDICATION USE BY THE STUDENT DURING SCHOOL
20 HOURS, AT SCHOOL-SPONSORED ACTIVITIES, AND WHILE IN TRANSIT TO OR
21 FROM SCHOOL OR SCHOOL-SPONSORED ACTIVITIES;

22 (IV) THE STUDENT'S PARENT OR LEGAL GUARDIAN COMPLETES
23 AND SUBMITS TO THE PUBLIC OR NONPUBLIC SCHOOL THE
24 DOCUMENTATION REQUIRED BY RULE OF THE STATE BOARD OF EDUCATION
25 PURSUANT TO SUBSECTION (3) OF THIS SECTION, INCLUDING BUT NOT
26 LIMITED TO:

27 (A) A WRITTEN MEDICAL AUTHORIZATION THAT INCLUDES THE

1 SIGNATURE OF THE HEALTH CARE PRACTITIONER FOR THE MEDICATION
2 PRESCRIBED; THE NAME, PURPOSE, PRESCRIBED DOSAGE, FREQUENCY, AND
3 LENGTH OF TIME BETWEEN DOSAGES OF THE MEDICATIONS TO BE
4 SELF-ADMINISTERED; AND CONFIRMATION FROM THE HEALTH CARE
5 PRACTITIONER THAT THE STUDENT HAS BEEN INSTRUCTED AND IS CAPABLE
6 OF SELF-ADMINISTRATION OF THE PRESCRIBED MEDICATIONS;

7 (B) A WRITTEN STATEMENT FROM THE STUDENT'S PARENT OR
8 LEGAL GUARDIAN RELEASING THE SCHOOL, SCHOOL DISTRICT, ANY
9 ASSOCIATED ENTITY, AND EMPLOYEES AND VOLUNTEERS OF THE SCHOOL,
10 SCHOOL DISTRICT, AND ANY ASSOCIATED ENTITY FROM LIABILITY, EXCEPT
11 IN CASES OF WILLFUL OR WANTON CONDUCT OR DISREGARD OF THE
12 CRITERIA OF THE TREATMENT PLAN; AND

13 (C) A WRITTEN CONTRACT BETWEEN THE SCHOOL NURSE, THE
14 STUDENT, AND THE STUDENT'S PARENT OR LEGAL GUARDIAN ASSIGNING
15 LEVELS OF RESPONSIBILITY TO THE PARENT OR LEGAL GUARDIAN,
16 STUDENT, AND SCHOOL EMPLOYEES.

17 (c) A TREATMENT PLAN SHALL BE EFFECTIVE ONLY FOR THE
18 SCHOOL YEAR IN WHICH IT IS APPROVED. THE PUBLIC SCHOOL SHALL
19 APPROVE A NEW TREATMENT PLAN FOR EACH SCHOOL YEAR SO LONG AS
20 THE PLAN MEETS THE CONDITIONS SPECIFIED IN PARAGRAPH (b) OF THIS
21 SUBSECTION (4). THE PARENT OR LEGAL GUARDIAN SHALL SUBMIT A NEW
22 TREATMENT PLAN ANNUALLY OR MORE OFTEN IF CHANGES OCCUR IN THE
23 STUDENT'S HEALTH OR PRESCRIBED TREATMENT.

24 (5) IF THE PROVISIONS OF THIS SECTION ARE MET, A SCHOOL,
25 SCHOOL DISTRICT, SCHOOL DISTRICT DIRECTOR, OR SCHOOL OR SCHOOL
26 DISTRICT EMPLOYEE OR A VOLUNTEER NOT OTHERWISE PROVIDED FOR
27 UNDER SECTION 13-21-108, C.R.S., SHALL NOT BE LIABLE IN A SUIT FOR

1 DAMAGES AS A RESULT OF AN ACT OR OMISSION RELATED TO A STUDENT'S
2 OWN USE OF THE STUDENT'S EPINEPHRINE AUTO-INJECTOR OR ANY OTHER
3 MEDICATION CONTAINED IN AN APPROVED TREATMENT PLAN UNLESS THE
4 DAMAGES WERE CAUSED BY WILLFUL OR WANTON CONDUCT OR
5 DISREGARD OF THE CRITERIA OF THE TREATMENT PLAN.

6 (6) THE STATE BOARD OF EDUCATION, WITH ASSISTANCE FROM THE
7 DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT, MAY PROMULGATE
8 RULES FOR TREATMENT PLANS FOR THE SELF-ADMINISTRATION OF
9 MEDICATIONS PURSUANT TO THIS SECTION.

10 SECTION 3. 22-30.5-505, Colorado Revised Statutes, is
11 amended BY THE ADDITION OF A NEW SUBSECTION to read:

12 **22-30.5-505. State charter school institute - institute board -**
13 **appointment - powers and duties - rules.** (14) PURSUANT TO SECTION
14 22-30.5-518, THE INSTITUTE SHALL ADOPT AND IMPLEMENT A POLICY FOR
15 THE MANAGEMENT OF FOOD ALLERGIES AND ANAPHYLAXIS AMONG
16 STUDENTS ENROLLED IN INSTITUTE CHARTER SCHOOLS.

17 SECTION 4. Part 5 of article 30.5 of title 22, Colorado Revised
18 Statutes, is amended BY THE ADDITION OF A NEW SECTION to
19 read:

20 **22-30.5-518. Institute charter school food allergy and**
21 **anaphylaxis management policy.** == ON OR BEFORE JULY 1, 2010, THE
22 STATE CHARTER SCHOOL INSTITUTE SHALL ADOPT AND IMPLEMENT A
23 POLICY FOR THE MANAGEMENT OF FOOD ALLERGIES AND ANAPHYLAXIS
24 AMONG STUDENTS ENROLLED IN INSTITUTE CHARTER SCHOOLS. THE
25 POLICY SHALL INCLUDE, AT A MINIMUM, MEASURES THAT SATISFY THE
26 STATEWIDE POLICY FOR THE MANAGEMENT OF FOOD ALLERGIES AND
27 ANAPHYLAXIS AMONG STUDENTS ENROLLED IN THE PUBLIC SCHOOLS IN

1 THE STATE, WHICH STATEWIDE POLICY IS ESTABLISHED PURSUANT TO
2 RULES PROMULGATED BY THE STATE BOARD PURSUANT TO SECTION
3 22-2-135.

4 ==
5 ==

6 **SECTION 5.** Article 32 of title 22, Colorado Revised Statutes, is
7 amended BY THE ADDITION OF A NEW SECTION to read:

8 **22-32-139. Food allergies and anaphylaxis policy**

9 **required.** == ON OR BEFORE JULY 1, 2010, EACH SCHOOL DISTRICT
10 BOARD OF EDUCATION SHALL ADOPT AND IMPLEMENT A POLICY FOR THE
11 MANAGEMENT OF FOOD ALLERGIES AND ANAPHYLAXIS AMONG STUDENTS
12 ENROLLED IN THE SCHOOLS OF THE SCHOOL DISTRICT. THE POLICY SHALL
13 INCLUDE, AT A MINIMUM, MEASURES THAT SATISFY THE STATEWIDE
14 POLICY FOR THE MANAGEMENT OF FOOD ALLERGIES AND ANAPHYLAXIS
15 AMONG STUDENTS ENROLLED IN THE PUBLIC SCHOOLS IN THE STATE,
16 WHICH STATEWIDE POLICY IS ESTABLISHED PURSUANT TO RULES
17 PROMULGATED BY THE STATE BOARD OF EDUCATION PURSUANT TO
18 SECTION 22-2-135.

19 == ==

20 **SECTION 6.** Part 1 of article 1.5 of title 25, Colorado Revised
21 Statutes, is amended BY THE ADDITION OF A NEW SECTION to
22 read:

23 **25-1.5-109. Food allergies and anaphylaxis policy for schools**

24 **- powers and duties of department.** (1) THE DEPARTMENT HAS, IN
25 ADDITION TO ALL OTHER POWERS AND DUTIES IMPOSED UPON IT BY LAW,
26 THE POWERS AND DUTIES PROVIDED IN THIS SECTION AS FOLLOWS:

27 (a) TO CONSULT WITH THE STATE BOARD OF EDUCATION

1 CONCERNING THE ADOPTION OF A POLICY FOR THE MANAGEMENT OF FOOD
2 ALLERGIES AND ANAPHYLAXIS AMONG STUDENTS ENROLLED IN THE
3 PUBLIC SCHOOLS IN THE STATE, AS DESCRIBED IN SECTION 22-2-135,
4 C.R.S.; AND

5 (b) TO DEVELOP, MAINTAIN, AND MAKE AVAILABLE TO SCHOOL
6 DISTRICTS A STANDARD FORM TO BE USED BY SCHOOL DISTRICTS AND
7 INSTITUTE CHARTER SCHOOLS TO GATHER INFORMATION FROM PHYSICIANS
8 AND PARENTS AND GUARDIANS OF STUDENTS CONCERNING STUDENTS'
9 RISKS OF FOOD ALLERGIES AND ANAPHYLAXIS AND THE TREATMENT
10 THEREOF. THE STANDARD FORM SHALL INCLUDE, AT A MINIMUM, FIELDS
11 FOR GATHERING THE INFORMATION DESCRIBED IN SECTION 22-2-135 (3)
12 (b), C.R.S. [REDACTED]

13 **SECTION 7. Appropriation.** In addition to any other
14 appropriation, there is hereby appropriated, out of any moneys in the
15 general fund not otherwise appropriated, to the department of education,
16 assistance to public schools, grant programs, distributions, and other
17 assistance, health and nutrition, federal nutrition programs, for the fiscal
18 year beginning July 1, 2009, the sum of one thousand nine hundred
19 fifty-one dollars (\$1,951), or so much thereof as may be necessary, for the
20 implementation of this act.

21 **SECTION 8. Act subject to petition - effective date.** This act
22 shall take effect at 12:01 a.m. on the day following the expiration of the
23 ninety-day period after final adjournment of the general assembly that is
24 allowed for submitting a referendum petition pursuant to article V,
25 section 1 (3) of the state constitution, (August 4, 2009, if adjournment
26 sine die is on May 6, 2009); except that, if a referendum petition is filed
27 against this act or an item, section, or part of this act within such period,

1 then the act, item, section, or part, if approved by the people, shall take
2 effect on the date of the official declaration of the vote thereon by
3 proclamation of the governor.