



STATE OF HAWAII
DEPARTMENT OF EDUCATION
KA 'OIHANA HO'ONA'AUAO
P.O. BOX 2360
HONOLULU, HAWAII 96804

Date: 02/12/2026

Time: 02:00 PM

Location: 309 VIA VIDEOCONFERENCE

Committee: EDN

Department: Education

Person Testifying: Keith T. Hayashi, Superintendent of Education

Title of Bill: HB1717, RELATING TO STUDENT HEALTH.

Purpose of Bill: Authorizes a school to maintain a stock supply of over-the-counter oral antihistamines to be administered under certain conditions. Authorizes school personnel to administer the over-the-counter oral antihistamine medication, under certain conditions.

Department's Position:

The Hawai'i State Department of Education (Department) respectfully opposes HB1717 due to safety, clinical, and legal concerns related to the administration of over-the-counter medications in school settings.

HB1717 would authorize schools to maintain a stock supply of over-the-counter oral antihistamines and permit trained school personnel to administer them to students with documented allergies pursuant to a physician-approved allergy response protocol and parental consent. While the Department supports timely responses to student health needs, this measure expands medication administration authority beyond the Department's role as an educational agency and introduces legal and clinical ambiguity.

Determining whether an antihistamine is medically indicated on an "as needed" basis requires clinical judgment, including assessing symptoms and distinguishing mild allergic reactions from potentially life-threatening anaphylaxis. These determinations fall within the scope of licensed health care professionals and cannot be safely delegated to unlicensed personnel through general training alone.

The bill further permits medication administration based on a medication being "prescribed or recommended or otherwise approved" by a licensed provider. This language is inconsistent with existing medication administration standards. Under Hawai'i Revised Statutes Chapter 457, registered nurses may administer medications only pursuant to a valid prescription or medical order. Allowing administration based on a "recommendation" creates ambiguity that may conflict with professional practice standards and complicate nurse oversight and participation.

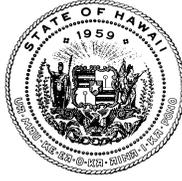
Operationally, over-the-counter antihistamines vary widely in formulation, dosage, and active ingredients. Maintaining a stock supply aligned with individual medical plans

increases the risk of dosing or product errors. Schools are not licensed health care or pharmacy entities, and assuming responsibility for stocking and distributing medications raises compliance and risk management concerns beyond the Department's statutory mission and infrastructure.

The Department currently supports students with known allergies through established emergency care plans and evidence-based protocols. Medical consensus identifies epinephrine as the first-line treatment for severe allergic reactions, or anaphylaxis, and the Department's policies prioritize rapid symptom recognition, prompt epinephrine administration when indicated, and immediate activation of emergency medical services.

The Department appreciates the intent of this measure and remains committed to student health and safety. However, any expansion of medication administration authority in schools must be tailored and fully aligned with clinical standards, licensure laws, and the operational realities of educational settings to avoid unintended risk to students and staff.

Thank you for the opportunity to provide testimony on this measure.



STATE OF HAWAII
DEPARTMENT OF HEALTH
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Testimony COMMENTING on HB1717
RELATING TO STUDENT HEALTH

REPRESENTATIVE JUSTIN WOODSON, CHAIR
HOUSE COMMITTEE ON EDUCATION

Hearing Date: February 12, 2026 @ 2:00 pm

Room Number: 309

1 **Fiscal Implications:** None

2 **Department Position:** The Department of Health (“Department”) offers the following
3 comments.

4 **Department Testimony:** The Communicable Disease and Public Health Nursing Division
5 (CDPHND) provides the following testimony on behalf of the Department. This bill proposes
6 that schools maintain a supply of over-the-counter (OTC) antihistamines for school personnel to
7 administer to students and be trained to recognize signs and symptoms of allergic reactions.
8 While the intent of the bill is to enhance student safety, several clinical, regulatory, and
9 logistical considerations must be addressed.

- 10 1. Clinical implications include the importance of an accurate assessment of allergic
11 reactions, including distinguishing mild symptoms from anaphylaxis. This requires
12 clinical judgement that falls within the scope of registered nursing practice as defined
13 under HRS Chapter 457 (Nurses). In schools, the health-related role is typically fulfilled
14 by school health assistants.
- 15 2. Timeliness of anaphylaxis management concerns include potential delays in recognizing
16 anaphylaxis that may lead to the delayed administration of epinephrine, significantly

1 increasing the risk of adverse outcomes. Prompt and appropriate use of epinephrine is
2 essential to prevent potentially fatal anaphylactic events.

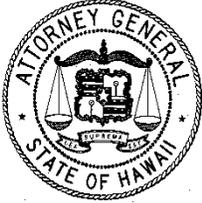
3 3. Logistical concerns include the broad range of available OTC antihistamine formulations
4 and dosages that may create challenges for schools in maintaining appropriate
5 inventory that meets diverse student needs.

6 4. Professional Practice Requirement concerns are that Registered Nurses cannot engage
7 in medication administration or staff training based solely on a general recommendation
8 from a licensed physician or authorized health care provider. For students to receive
9 medication at school, a valid prescription is required to comply with professional
10 practice and regulatory standards governing nursing care.

11

12 **Offered Amendments:** None

13 Thank you for the opportunity to testify on this measure.



**TESTIMONY OF
THE DEPARTMENT OF THE ATTORNEY GENERAL
KA 'OIHANA O KA LOIO KUHINA
THIRTY-THIRD LEGISLATURE, 2026**

ON THE FOLLOWING MEASURE:

H.B. NO. 1717, RELATING TO STUDENT HEALTH.

BEFORE THE:

HOUSE COMMITTEE ON EDUCATION

DATE: Thursday, February 12, 2026 **TIME:** 2:00 p.m.

LOCATION: State Capitol, Room 309

TESTIFIER(S): Anne E. Lopez, Attorney General, or
Anne T. Horiuchi, Deputy Attorney General

Chair Woodson and Members of the Committee:

The Department of the Attorney General (Department) provides the following comments.

The bill authorizes a school to maintain a stock supply of over-the-counter (OTC) oral antihistamines to be administered under certain conditions and authorizes school personnel to administer the OTC oral antihistamine medication under certain conditions.

The bill provides that each school may maintain a supply of or otherwise store OTC oral antihistamines (page 1, line 17, through page 2, line 2), but does not specify who would be responsible for supplying the stock of OTC oral antihistamines. The Department of Education (DOE) could be exposed to liability if parents mistakenly assume that a school is storing OTC oral antihistamines (and it is not), and schools who choose to purchase and maintain the stock of OTC oral antihistamines would need to closely monitor expiration dates of the supply. To address this concern, the Department suggests: (1) deleting "and" on page 2, line 12; (2) replacing the period at the end of page 2, line, 15, with "and"; and (3) adding a new paragraph (4) to subsection (b) of the new section 302A- , Hawaii Revised Statutes (HRS), to be inserted after subsection (b)(3) (page 2, line 15), as follows:

(4) The parent or guardian of the student has provided the over-the-counter oral antihistamine to the school for storage and administration.

The bill also provides that school personnel may administer an OTC oral antihistamine to a student, provided that "[t]he over-the-counter oral antihistamine is prescribed or recommended otherwise approved by the student's licensed physician or authorized health care provider[.]" (Page 2, lines 8-10.) This wording is confusing. The Department suggests revising subsection (b)(1) on page 2, lines 8-10, as follows:

The over-the-counter oral antihistamine is prescribed **by,**
[or] recommended **by, or** otherwise approved by the
student's licensed physician or authorized health care
provider.

(Suggested changes Ramseyered against the existing text of the bill and in bold.)

The Department further notes that new section 302A- (a) and (b), HRS (page 1, line 16, through page 2, line 15), are permissive provisions, while new section 302A- (c), HRS (page 2, line 16, through page 3, line 9), is a mandatory provision. To effectuate the bill's intent, the Department suggests revising new section 302A- (c), starting on page 2, line 16, as follows:

~~[The department shall ensure that all]~~ **All school**
personnel **[assigned]** **who voluntarily agree** to administer
over-the-counter oral antihistamine pursuant to this section
[are trained] **shall receive training** through a training
program

(Suggested changes Ramseyered against the existing text of the bill and in bold.)

Thank you for the opportunity to provide comments on this bill.

HB-1717

Submitted on: 2/11/2026 10:36:05 AM

Testimony for EDN on 2/12/2026 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Kimberly Lani	Individual	Support	Remotely Via Zoom

Comments:

**Testimony in STRONG SUPPORT of HB1717
Relating to Student Health: Over-the-Counter Antihistamines in Schools
Submitted by: Kimberly Lani, Moloka'i Parent
Date: February 11, 2026**

Aloha Members of the Committee,

Mahalo for allowing me to share my voice in support of HB1717. This bill is about more than medication access, it's about life-saving clarity. It gives schools the ability to respond appropriately when a child is experiencing an allergic reaction and every second counts.

I'm a parent of a child with a rare and dangerous condition called Wheat-Dependent Exercise-Induced Anaphylaxis (WDEIA). For my son, simply eating wheat and then hurrying to class could trigger an anaphylactic reaction. His emergency plan, written by his board-certified allergist and immunologist, includes an EpiPen followed by oral diphenhydramine (Benadryl). That's the prescribed standard of care from his physician, who specializes in allergy, immunology, and anaphylaxis.

But under the Department of Education's current limitations, school staff are not permitted to administer oral Benadryl even when it's medically prescribed. That's not just confusing, it's dangerous. It creates a critical gap in care after epinephrine is given, but before emergency services arrive.

And on Moloka'i, where we live, that gap could be deadly.

Our island has just one hospital and a limited number of ambulances. Response time is never guaranteed. If another emergency is happening across the island or there's a delay for any reason, there is no backup. The fire department also responds to emergencies, however, they have limitations as well.

I believe this bill can bring clarity to an issue causing a great deal of frustration and confusion. It lets school personnel act in accordance with a physician's plan, not just to stabilize, but to prevent a reaction from escalating while waiting for help to arrive.

This is not a hypothetical scenario for our family. In school year 23-24, my son was served wheat five times by the school cafeteria, despite having formal J-1 meal orders in place. Four of those times, he was able to recognize it and bring it to staff and admin attention. On the fifth time, he consumed wheat hidden in a soup. I had to rush him to the emergency room myself, with our epipen in hand. There was no time to wait for people to figure out how to follow a plan, and nor did anyone call an ambulance.

People sometimes say, “That won’t happen at school.” But it did.

This isn’t about blame. It’s about fixing a hole in the system before a child dies because someone was afraid to follow a medical plan. This bill gives them the protection they need to administer life-saving medication according to the doctor’s orders.

I respectfully urge you to pass HB1717 and give Hawai‘i’s students, especially those in rural areas like ours, a fighting chance when emergencies happen.

Mahalo for your time, your leadership, and your commitment to protecting our keiki.

**Mahalo,
Kimberly Lani
Mother of a Child with Life-Threatening Allergies**

HB-1717

Submitted on: 2/11/2026 1:29:46 PM

Testimony for EDN on 2/12/2026 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Brian H Shimabukuro	Individual	Support	Written Testimony Only

Comments:

Aloha, My name is Brian Shimabukuro. I am in support of the passage of HB1717 to enable qualified//trained staff to be able to administer over the counter oral antihistamines to appropriately designated students in the event of a compromising allergic episode.

The importance of school staff being able to treat "life threatening" conditions and emergencies is a no brainer in protecting students under our care. This initiative broadens our ability to manage problems that may arise. Administration of oral Antihistamines with symptomatic allergic reaction to time sensitive treatment can address a medical problem to limit or diminish the severity to keep it from progressing into a medical emergency. It may even prevent death while awaiting medical assistance and transport. It is another example of how we can both protect and service the students in our charge. Malama i ke Keiki Mahalo, Brian Shimabukuro.