

STATE OF NEW YORK

9245

2025-2026 Regular Sessions

IN ASSEMBLY

November 7, 2025

Introduced by M. of A. ROSENTHAL -- read once and referred to the
Committee on Health

AN ACT to amend the public health law, in relation to requiring epineph-
rine devices for anaphylaxis and staff trained to use them at child
day care centers

The People of the State of New York, represented in Senate and Assem-
bly, do enact as follows:

1 Section 1. Section 2500-h of the public health law, as amended by
2 chapter 254 of the laws of 2019, is renumbered section 2500-h-1.

3 § 2. Paragraphs (b), (e), and (f) of subdivision 2 and subdivision 3
4 of section 2500-h-1 of the public health law, as amended and paragraph
5 (f) of subdivision 2 as added by chapter 254 of the laws of 2019 and
6 such section as renumbered by section one of this act, are amended,
7 three new paragraphs (g), (h), and (i) are added to subdivision 2 and a
8 new subdivision 6 is added to read as follows:

9 (b) a training course for appropriate school and child day care
10 personnel for preventing and responding to anaphylaxis. At least one
11 staff member trained to administer an epinephrine device, as defined by
12 paragraph (i) of this subdivision, shall be present at all times at all
13 child day care facilities while any children are present. The commis-
14 sioner shall, in consultation with the commissioner of children and
15 family services and the commissioner of education, consider existing
16 training programs for responding to anaphylaxis in order to avoid dupli-
17 cative training requirements. Such pre-existing program shall fulfill
18 the requirement for a training course pursuant to this subdivision if
19 the standards of such pre-existing program are deemed by the commis-
20 sioner to be at least as stringent as the standards promulgated by the
21 commissioner in the development of the training course by the state.
22 Such training shall include, but not be limited to:

23 (i) how to recognize the signs and symptoms of severe allergic
24 reactions and anaphylaxis;

EXPLANATION--Matter in italics (underscored) is new; matter in brackets
[-] is old law to be omitted.

LBD13596-04-5

1 (ii) the recommended weight-based dosage of epinephrine devices for
2 infants, toddlers, children, and adults;

3 (iii) standards and procedures for the storage and use of epinephrine
4 devices; and

5 (iv) emergency follow-up procedures;

6 (e) strategies for the reduction of the risk of exposure to anaphylac-
7 tic causative agents, including food and other allergens; [~~and~~]

8 (f) a communication plan for discussion with children that have devel-
9 oped adequate verbal communication and comprehension skills and with the
10 parents or guardians of all children about foods that are safe and
11 unsafe and about strategies to avoid exposure to unsafe food[~~;~~];

12 (g) the requirement that all child day care providers maintain on site
13 at least two epinephrine devices, as defined by section three thousand-c
14 of this chapter, in dosages deemed appropriate by the commissioner for
15 children in the care of such child day care providers. At least one
16 staff member shall be designated to oversee the storage, maintenance,
17 control, and disposal of such epinephrine devices to ensure such
18 epinephrine devices remain available for use and in unexpired, operable
19 condition; and

20 (h) a plan to communicate any allergy-related illnesses, accidents,
21 injuries, and epinephrine device administrations sustained by a child
22 under the care of a child day care provider to such child's parent or
23 guardian and reporting such incidents to the department within twenty-
24 four hours of such incident.

25 (i) For the purposes of this section, "epinephrine auto-injector
26 device" or "epinephrine device" means an epinephrine delivery device or
27 product approved by the federal food and drug administration and
28 used for the automatic injection or administration of a premeasured
29 weight-based dosage of epinephrine into the human body for the purpose
30 of emergency treatment of a person appearing to experience anaphylac-
31 tic symptoms approved by the food and drug administration.

32 3. (a) At least once per calendar year, schools shall send a notifica-
33 tion to the parents and/or guardians of all children under the care of
34 such schools to make them aware of such anaphylactic policies, as devel-
35 oped by the commissioner. For children under the care of the child day
36 care providers, such notification shall be provided by the child day
37 care provider when the child is enrolled and annually thereafter. Such
38 notifications shall include contact information for parents and guardi-
39 ans to engage further with the school or child day care provider to
40 learn more about individualized aspects of such policies.

41 (b) All child day care providers shall maintain an incident log to be
42 available to the department by request. Such log shall maintain a record
43 of any allergy-related illnesses, accidents, injuries, and epinephrine
44 device administrations. Such log shall include, but not be limited to,
45 the child's name and date of birth, the date and time of the incident,
46 names and positions of staff members and other adults present, a brief
47 statement describing the incident, any emergency treatment received, and
48 if parents or guardians were notified or an attempt to notify was made.

49 6. The office of children and family services shall create informa-
50 tional materials outlining the anaphylaxis policy required by this
51 section. The office of children and family services and the department
52 shall post these materials on their respective websites within six
53 months of the effective date of this subdivision.

54 § 3. This act shall take effect on the ninetieth day after it shall
55 have become a law.