



**Ohio Association of School Nurses**  
**House Bill 606**  
**Proponent Testimony**  
**May 10, 2022**

Chair Manning, Vice Chair Bird, Ranking Member Robinson and esteemed members of the House Primary & Secondary Education Committee, thank you for allowing the Ohio Association of School Nurses the opportunity to submit testimony on HB 606. We are in full support of the legislation and appreciate the sponsors' willingness to accept our input and suggestions to get the bill to where it is today.

Epilepsy – the most common seizure disorder – is diagnosed more often in school age children than in adults, which is why codifying the requirement for an individualized seizure action plan in Ohio schools is so important. Although epilepsy seizures can usually be controlled with medication, they present critical medical emergencies for students when they do occur. Schools should have the protocols in place necessary to respond quickly and appropriately to any student seizure, and ensure that qualified health professionals armed with the experience and education needed to prevent further harm to the student are engaged. School nurses are often the only fulltime school staff with medical experience who also have an understanding of the inner-workings of school buildings and processes. The value this unique marriage of expertise brings to the table makes their role in responding to student seizures absolutely critical.

OASN is supportive of the way HB 606 retains language ensuring the school nurse has primary oversight of seizure care and medication administration, including ensuring the action plan is maintained in the school nurse office. Seizure disorders are complex and student safety is too important to risk delegating care to untrained staff. School nurses' education allows us to understand all the factors that can impact a student's seizure history, the implications of any daily medication they are taking, and the role of the various rescue medications that may be required. To provide students with the best care possible, having a licensed medical professional overseeing seizure response will ensure no contraindication, symptom or detail of medical history is missed. Further, school nurses are in the best position to determine who may need to know information about the student's seizure disorder because of their understanding of both the medical implications of the disorder and the daily interactions with school resources and staff. OASN appreciates that clarification provided in the bill.

Finally, we do feel it is important that this version of the bill clarifies the definition of seizure disorder so that students with singular febrile seizures are not pulled into the requirements of HB 606. There are many causes of singular seizures with no long-term medical implications that

would necessitate a school action plan. The definition contained in Sec. 3313.7117 sufficiently protects students with epilepsy without creating additional unnecessary administrative burdens.

Thank you to the Epilepsy Foundation and the sponsors, again, for their work on this important bill. OASN looks forward to continued collaboration with school staff, parents and outside partners to ensure the safety of our students impacted by seizure disorders. We urge support for HB 606.