



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 553		DATE: 3/4/2025	
COMMITTEE: Health and Mental Health			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: ARNIE C."HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: arniedienoff@yahoo.com	ATTENDANCE: In-Person		SUBMIT DATE: 3/4/2025 11:44 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

I am in Support of this Bill. This is a MUST to allow School Nurses and other Trained School Personnel to provide "Nasal Epinephrine Products" to students who are having a allergenic reaction. In some Counties in Missouri there is no Ambulance, no Paramedics. Emergency Medical Service MUST travel from another County and can be between 35 to 60 Minutes from arriving at the screen to provide Emergency-Care.



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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: LINDA NEWMAN		PHONE NUMBER: 314-303-4556	
BUSINESS/ORGANIZATION NAME: MISSOURI ASSOCIATION OF SCHOOL NURSES		TITLE: PAST PRESIDENT	
ADDRESS: 16080 NW 124TJE STREET			
CITY: PLATTE CITY		STATE: MO	ZIP: 64079
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/4/2025 12:00 AM	
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