

(School District/ISD)

USE OF MEDICATIONS POLICY

The Board of Education shall not be responsible for the diagnosis and treatment of student illness. The administration of prescribed medication and/or medically-prescribed treatments to a student during school hours will be permitted only when failure to do so would jeopardize the health of the student, the student would not be able to attend school if the medication or treatment were not made available during school hours, or the child is disabled and requires medication to benefit from his/her educational program.

For purposes of this policy, "medication" shall include all medicines including those prescribed by a physician and any non-prescribed (over-the-counter) drugs, preparations, and/or remedies. "Treatment" refers both to the manner in which a medication is administered and to health-care procedures which require special training, such as catheterization.

Before any prescribed medication or treatment may be administered to any student during school hours, the Board shall require the written prescription from the child's physician accompanied by the written authorization of the parent. Both must also authorize any self-medication by the student.

Before any non-prescribed medication or treatment may be administered, the Board shall require the prior written consent of the parent who must also authorize any self-medication by his/her child. Medications will be administered by the District in accordance with the Superintendent's guidelines.

Only medication in its original container; labeled with the date, if a prescription; the student's name; and exact dosage will be administered. Parents, or students authorized in writing by their physician and parents, may administer medication or treatment.

Staff members are to administer medication or treatment only in the presence of another adult, except in the case of an emergency that threatens the life or health of the student. Staff licensed as professional registered nurses are exempt from this requirement.

All staff authorized to administer medication or treatment will receive training on this policy and the Superintendent's guidelines, as well as appropriate procedures for administering the medication or treatment. This training shall be provided by qualified individuals with both knowledge of the District's policy and procedures and the administration of medications or treatment. Where possible, this training should be provided by a licensed registered nurse, a licensed physician's assistant, or a licensed physician.

All medication shall be kept in a locked storage case in the school office.

The Board shall permit the administration by staff of any medication requiring intravenous or intramuscular injection or the insertion of a device into the body when both the medication and the procedure are prescribed by a physician and the staff member has completed any necessary training.

Students who may require administration of an emergency medication may have such medication in accord with the Superintendent's administrative guidelines.

Students may possess and self-administer a metered dose or dry powder inhaler for relief of asthma, or before exercise to prevent onset of asthma symptoms, while at school, on school-sponsored transportation, or at any school-sponsored activity in accord with the Superintendent's guidelines, if the following conditions are met:

- A. There is written approval from the student's physician or other health care provider and the student's parent/guardian to possess and use the inhaler (see Authorization for the Possession and Use of Asthma Inhalers, Epi-Pens, or Prescribed Emergency Medication Form (pages 8 and 9); and
- B. The building administrator has received a copy of the written approvals from the physician and the parent/guardian.

Students with a need for emergency medication may also be allowed to self possess and self administer such medication, provided that they meet the same conditions established above.

This policy and the administrative guidelines developed to establish appropriate procedures shall be implemented in such a manner to comply with District's obligations and the student's needs under an Individualized Education Plan, or other legally required accommodation for individuals with disabilities.

The Superintendent shall prepare administrative guidelines to ensure the proper implementation of this policy.

Guidelines for the Use of Medications

The medications and/or treatments which may be administered are defined in above policy. In those circumstances where a student must take prescribed medication during the school day, the following guidelines are to be observed:

- A. Parents should determine with their physician's counsel whether the medication schedule can be adjusted to avoid administering medication during school hours.

- B. The Authorization for Prescribed Medication or Treatment Form (pages 10 and 11) must be filed with the **Director of Special Education** before the student will be allowed to begin taking any medication during school hours. This written and signed request form is to be submitted on an annual basis and will include:

1. student's name;
2. medication, dosage, and procedure for administering;
3. times required;
4. special instructions including storage and sterility requirements;
5. date prescribed medication will be started;
6. date prescribed medication will no longer be needed;
7. physician's name, address, and telephone number;
8. probable side effects;
9. authorization by both the physician and the parent for a student to self-administer the medication but only in the presence of two (2) authorized staff members;
10. authorization for school personnel to administer the prescribed medication, if necessary;
11. agreement/satisfactory arrangement to deliver medication to/from school;
12. agreement to notify the school in writing if the medication, dosage, schedule, or procedure is changed or eliminated. A new request form must be submitted each school year or for each new medication

- C. The building administrator shall designate, on the Authorization for Prescribed Medication or Treatment Form (pages 10 and 11), the staff member(s) authorized to administer the medication or required treatment. Those individuals must have received training on administering the medication or treatment prior to servicing the student, except in an emergency situation. **(NOTE: NOT STATUTORILY REQUIRED BUT HIGHLY RECOMMENDED.)**

D. The Authorization for the Possession and Use of Asthma Inhalers, Epi-pens or Prescribed Emergency Medication Form (pages 8 and 9) shall be completed and signed by a physician and the parents authorizing the student's use of a metered dose or dry powdered inhaler, or prescribed emergency medication at school, or Epi-pen where student has been diagnosed as subject to severe allergic reaction, on District transportation and school activities. This form must be received by the building principal and/or school nurse if one is assigned to the building. Notice of this authorization shall be delivered to the staff members and transportation personnel to whom the student is assigned.

Students may possess and self-administer prescribed emergency medication or a metered dose or dry powder inhaler for relief of asthma, or before exercise to prevent onset of asthma symptoms, while at school, on school-sponsored transportation, or at any school-sponsored activity in accord with the Superintendent's guidelines, if the following conditions are met:

1. There is written approval from the student's physician or other health care provider and the student's parent/guardian to possess and use the inhaler; and
2. the building administrator has received a copy of the written approvals from the physician and the parent/guardian.

E. All medications to be administered during school hours must be registered with the principal's office. Upon receipt of the medication, the principal shall verify the amount of medication brought to the school and indicate that amount on the student medication log sheet.

F. Medication that is brought to the office will be properly secured. Medication may be conveyed to school directly by the parent or transported by transportation personnel (bus driver and/or bus aide) at parental request. This should be arranged in advance. Two to four (2-4) weeks' supply of medication is recommended. Medication **MAY NOT** be sent to school in the student's lunch box, pocket, or other means on or about his/her person. Exceptions to this would be prescriptions for emergency medications for allergies and/or reactions, or inhalers for asthma with proper authorization.

G. For each prescribed medication, the container shall have a pharmacist's label with the following information:

1. student's name
2. physician's name
3. date
4. pharmacy name and telephone
5. name of medication
6. prescribed dosage and frequency
7. special handling and storage directions

H. The building administrator may request that the medication be provided in the exact dosage prescribed, so that the staff is not responsible for dividing or splitting the medication or pills.

I. Any unused medication unclaimed by the parent will be destroyed by the administrative personnel when a prescription is no longer to be administered or at the end of a school year. Notation of the method of disposal and the date shall be entered in a daily log on medication administration.

J. The staff member administering the medication shall ensure that the student takes the medication properly.

K. If a student does not take the medication at the proper time, the staff member responsible for administering the medication shall take appropriate steps to locate the student and administer the medication and to then notify the parents of the importance of the child reporting on time for his/her medication.

L. Any adverse reaction to the medication, as described in the physician's written instructions, shall be immediately reported to the student's parent/guardian, and the authorizing physician if so requested on the authorization form.

M. All medications are to be administered in such a way as to not unduly embarrass the student.

N. A log for each prescribed medication shall be maintained which will note the personnel giving the medication, the date, and the time of day. Both the administering and witnessing adult shall sign the log.

O. Any known errors in the administration of the medication shall be recorded on the log, and immediately reported to the building administrator. The building administrator shall promptly notify the parent/guardian and enter a notation on the log of the time of notification and any instructions from the parent/guardian.

P. This log will be maintained along with the physician's written request and the parent's written release.

Q. The Authorization for Prescribed Medication or Treatment Form (pages 10 and 11) shall be completed and signed by the principal authorizing the person(s) who may administer the medication or procedure. **A second adult must be present during the administration of any medication.** A licensed registered professional nurse may administer medication without a second adult present.

R. A count of each student's medication is to be made every week and the amount reconciled with the original amount indicated on the log sheet and the number administered since the last count.

S. If, for supportable reasons, the principal wishes to discontinue the privilege of a student self-administering a medication, she/he shall notify the parent of this decision in sufficient time for an alternative administration to be established.

T. Written documentation of any training provided for each person authorized to administer a prescribed medication or treatment will show:

1. what training was given;
2. the trainer's name and professional status;
3. when the training was given;
4. the duration of the training.

U. If a student is exhibiting behavior which causes a staff member to be concerned about his/her medical status, this behavior must be reported to the building administrator and expressed in writing in behavioral terms. The administrator or nurse shall promptly contact the parent/guardian, report the observations, and suggest that they seek medical attention for the child. The written observations may be given to the parent.

All staff authorized to administer medication or treatment shall receive appropriate training on the District's policy and guidelines, as well as any specific instruction relevant to the particular student's treatment or medication.

A. In-service training will be provided by personnel familiar with the District's policies, guidelines and proper medical administration procedures. Generally this will be done by a licensed registered nurse, licensed physician, or licensed physician's assistant. When any procedure other than oral administration of medication is required, the staff member will receive individualized training from qualified medical personnel.

B. In-service training should include familiarization with identifying and dispensing medications, as well as symptom of side effects. Training shall also cover all of the District's policies and guidelines regarding the administration of medication and treatment to students, including the record keeping procedures and forms.

C. A record shall be kept of the date, time and substance of the training that each staff member receives. This record shall be made available, upon request, to the parent/guardian.

D. Non-Prescribed (Over-the Counter) Medications

A student in grades 7-12 may be allowed to possess and self-administer an over-the-counter medication upon the written authorization of the parent. The parent must complete the Authorization for Non-Prescribed Medication or Treatment Form (pages 12 or 13) and submit it to the school office for filing in the student's records.

E. Dispensing of non-authorized, over-the-counter medication by District employees to students served by the District is prohibited. Where investigation confirms such allegations, prompt corrective action shall be taken up to and including dismissal.

Epinephrine is administered only in accordance with a written medication administration plan developed by the school administrator, satisfying the requirements and updated annually, which includes the following:

A. Diagnosis by a physician that the student is at high risk of a life-threatening allergic reaction, and a medication order containing indications for administration of epinephrine.

B. Written authorization by a parent or guardian (Authorization for the Possession and Use of Asthma Inhalers, Epi-pens, or Prescribed Emergency Medication Form) (pages 8 and 9).

C. Home and emergency phone number(s) of any other person(s) to be notified if the parents are unavailable.

When epinephrine is administered, there shall be immediate notification of the local emergency medical services system generally (911) followed by notification of the administrator, the student's parents or, if the parents are not available, any other designated person(s), and the student's physician.

Emergency Medication Guidelines

Board policy and procedures on the administration of medication must be observed at all times.

A. School personnel should administer only physician prescribed kits, or equivalent.

B. Schools are to be notified, in writing, of a student who may need emergency medication by his/her parents or physician. In all cases, this information should be conveyed to the **Director of Special Education** who will be responsible for ensuring that selected staff members receive appropriate instruction in the administration of such medication.

C. In addition, a notation should be made on the student's Emergency Medical Authorization Permit (page 14) for use on field trips. The medication should be available to the trip leader who shall be instructed on its proper application.

D. The transportation department should also be notified so that the appropriate bus driver can be made aware of the student who may need emergency medication. Bus drivers transporting such students should have the medication available and be trained in its proper application.

E. The student's parent will be responsible for providing the medication and is to be informed that the school may call emergency medical services when his/her child receives the medication.

F. If a serious situation does occur requiring the administration of emergency medication, the principal is to contact 911 and request that a mobile unit be dispatched to the school to deal with complications that may arise. The parents shall be contacted immediately after the call to emergency services.

G. Parents are responsible for providing the school with the proper medication with an adequate expiration date at the beginning of each school year.

**AUTHORIZATION FOR THE POSSESSION AND USE OF ASTHMA INHALERS, EPI-PENS, OR
PRESCRIBED EMERGENCY MEDICATION**

This form must be provided to the principal assigned to the building of student attendance. Appropriate school staff should be notified.

Student Name: _____ Date: _____

Address: _____

Authorization is hereby given for the student named above to:

receive the prescribed medication indicated from the designated school personnel.

self-administer the prescribed medication as permitted by law.

Medication Name: _____ Dosage: _____

Date the administration is to begin: _____ Date the administration is to cease: _____

Adverse reactions that should be reported to the physician: _____

Adverse reactions for unauthorized user: _____

Procedure to follow in the event that medication does not produce the expected relief from student's asthma attack/allergic reaction: _____

Other special instructions: _____

Any additional information required should be attached to this form:

Physician and parent/guardian names, signature, and emergency phone numbers are required.

Physician Name: _____ Phone: _____

Signature: _____
Date

Parent/guardian Name: _____ Phone: (Home) _____
(Work) _____
(Other) _____

Signature: _____
Date

Received by _____ Date _____
Principal

Received by _____ Date _____
Nurse

PHYSICIAN STATEMENT

To the Physician:

The School District requires that all of the following information be provided before it will administer medication or treatment to the student named on the reverse side.

I have prescribed the following medication _____

Beginning Date _____ Ending Date _____

Dosage, instructions, or precautions (including possible side effects): _____

I have prescribed the following treatment _____

Beginning Date _____ Ending Date _____

Physician's Signature _____ Telephone _____

Printed/Typed Name _____ Date _____

AUTHORIZATION FOR STAFF

The following staff members are authorized to administer the above-prescribed medication(s) and/or treatment(s).

Principal

EMERGENCY MEDICAL AUTHORIZATION PERMIT

Whenever my child is involved in a school activity and I am unavailable or otherwise unable to provide authorization directly, I grant to the school principal or his/her designee the authority to act for me and to provide any required consents and authorization for the delivery of emergency medical care, diagnoses, and treatment, including surgical intervention, if necessary, on behalf of my minor child listed below and to do all other necessary things as I might or could do to provide for the child's health and safety, if I were present.

This authorization is valid for the current school year or until such time as I withdraw the authorization.

Authorized _____ Date _____
Parent/Guardian

Child's Name

(Last) (First) (Middle)

School _____ Grade _____ Teacher _____

Birthdate _____ Sex _____ Telephone _____

Parent or Guardian Names _____

Home Address _____

Mother's Employment _____ Telephone _____

Father's Employment _____ Telephone _____

Doctor Preferred _____ Telephone _____

Doctor's Address _____

Dentist Preferred _____ Telephone _____

Dentist's Address _____

Insurance Company _____ I.D. No. _____

Important Medical Information

Allergies

Current Medications or Treatments _____

Previous Operations or Hospital Confinements _____

Other: _____