

## ADMINISTRATION OF MEDICATION FIELD TRIPS

It is the responsibility of the parent to coordinate the administration of the medication through the school office. If there are students who are in need of medications while on field trips, weekend or overnight school-related activities, the principal shall designate an individual to administer the medication. This individual must review the "Protocol for Administration of Medications". When medicine is transported for a field trip, the medicine should be placed in individual containers (Ziploc bag or envelope), identified by the following information:

1. Student's name
2. Name, dosage, and route of medicine.
3. Time to be administered.

Upon return to school, the individual, who administered the medication, must record information on the medication log, and sign the bottom of the medication log.

## PROTOCOL FOR STUDENTS WITH EMERGENCY SELF - MEDICATIONS

Students with Emergency Self-Medications, i.e. asthma inhalers, Epi-Pens, and Solu-Medrol etc., who self medicate, must follow the guidelines below:

1. The student's physician must prescribe the emergency medication and state in writing that the student has sufficient knowledge and maturity to safely and correctly self-manage their medical condition.
2. The parent/guardian must state in writing that the student has sufficient maturity to use the emergency medication correctly and release the school and its personnel from any responsibility regarding the emergency medication.
3. The student shall comply with the following:
  - a. The student shall keep the emergency medication in his/her possession all times and shall not leave it in a place accessible to other students.
  - b. The student shall not offer, nor allow use or possession of his/her emergency medication.
  - c. The student shall act in a responsible and discreet manner concerning his/her emergency medication.
4. If the student is having significant difficulty with his/her emergency medication, i.e. requiring repeated use of inhaled medication; he/she shall not continue to use the emergency medication in place of getting appropriate care.
5. The principal is the final judge of the student's compliance with these guidelines in the school.

6. The student will demonstrate the skill level necessary to use his/her emergency medication to the School Nurse.
7. The only liability, which the school can assume, is to comply with the terms of this protocol. The school can assume no liability for monitoring the self-administration, including the frequency and dose or the failure to self-medicate when necessary.
8. The student, parent/guardian, and physician will be provided a copy of "Protocol for Students with Emergency Self Medication in their Possession at School". The parent/guardian and physician must sign the Emergency Self Medication Authorization Form.

## NEBULIZER TREATMENT

Students who require nebulizer treatments at school will follow the protocol below:

1. Parents will present a completed Physician's School Medication Form to include:
  - a. Medication to be administered
  - b. Dose
  - c. Nebulizer Action Plan to include:
    - Frequency of the Nebulizer treatment.
    - Plan to follow if student's condition does not change or improve following Nebulizer treatment. (School Nurse will assist parent in preparing action plan.)
2. Nebulizer machine and prescribed medication for nebulizer administration will be provided by parent/guardian.
3. Replacement tubing and mouth pieces for nebulizer treatment are the responsibility of the parent/guardian.
4. The parent/guardian will provide training regarding the administration of nebulizer treatment to designated staff and school nurse.
5. Medication clerks/other designated staff will attend asthma professional development every two years.



## ADMINISTRATION OF MEDICATION DURING PRIME TIME

1. It is the responsibility of the parent/guardian to inform Prime Time staff of their child's physician's order to take medication during Prime Time. The parent/guardian must provide medication to Prime Time staff for administration prior to enrolling in the program. Students enrolled who are diagnosed during the course of the year will have 14 calendar days to present with emergency medications. In the absence of emergency medication(s) the school nurse will devise an emergency care plan that consists of calling 911.
2. Prime Time Staff must secure emergency medications and supporting documentation for all children with documented life threatening conditions. (i.e. asthma, diabetes, seizures and food/insect allergies). All medications must be locked, secured and mobile for transport in emergency situations.
3. It is the responsibility of Prime Time Staff to secure afternoon medications from the parent or primary administrator of medication prior to the closing of the main office. Prime Time Staff is also required to verify the most recent administration of medication to include prn (as needed).
4. Prime Time Staff shall attend medication/asthma professional development every two years and display all certifications in the medication log notebook.

## MAJOR CHRONIC ILLNESS LIST/CONFIDENTIAL HEALTH DATA

Please adhere to the following protocol when developing Major Chronic List/Confidential Health Data:

1. A copy of students Confidential School Health Form Grades K-12 will be kept in the front office in a confidential notebook for accessibility during emergencies.
2. It is recommended that this notebook(s) be alphabetized and organized by grade level.
3. Primary medication clerk or principal's designee should organize and maintain this confidential notebook.
4. The school nurse will provide an overview of major chronic illnesses and the importance of having this documentation in their update to school staff. The school nurse is responsible for reviewing the list and providing follow-up as needed, and selectively devising emergency action plans as determined by the nurse. The completed list is due the 30<sup>th</sup> calendar day from the start of school.



## CUMBERLAND COUNTY SCHOOLS PROTOCOL FOR ADMINISTRATION OF MEDICATIONS



Revised May 2010

## REGULATIONS THAT APPLY TO ADMINISTRATION OF ALL MEDICATIONS

For all medications including topical, rectal, oral medications, inhalers and injections administered during the school day, the following regulations apply:

- A. A copy of this regulation and a Physician's School Medication Form will be provided to parents.
- B. The parent/guardian must bring the medication to the school. Such medication must be in an original container labeled by the pharmacy. Parent/guardian will check in medication, count, and sign Medication Check-In Log with designated school personnel.
- C. The principal will designate a minimal of 3 individuals at each school who will be responsible for administering medication (one primary person and at least two back up).
- D. Designated Medication Administration Personnel will attend medication training every two years.
- E. The school district retains the right to reject a request for administration of medication.
- F. The only responsibility or liability that can be assumed by the school system or its personnel is to comply with the instructions forwarded by the student's parents and physician. The school system will assume no liability for students who self-medicate. Students with a life threatening condition are permitted to self-medicate. However, an Emergency Self-Medication Authorization Form must be completed and kept on file at school. Families of students who self-medicate during the school day are held liable if another student erroneously takes the medication. A backup medication needs to be provided by the parent/guardian and be locked up in the school's medication box.
- G. When a student refuses to cooperate with staff who is administering medication the following procedures shall be implemented and documented on the documentation forms.

- **FIRST INCIDENT:** The principal or designee shall make a telephone call to parents explaining the problem.
  - **SECOND INCIDENT:** A parent conference shall be held at the school with the following people: principal, person administering medication and parent.
  - **THIRD INCIDENT:** The principal will inform the parent that school staff cannot be responsible for administration of medication and that a new plan must be developed.
- H. When medication is to be administered in emergency situations, an Emergency Care Plan should be kept in the student's confidential health folder and with the prescribed medication.
- I. The parent/guardian of the student must assume responsibility for informing the principal, who in turn, will inform the designee of any change in the medication.
- J. Parent/guardian must pick up student medication no later than 7 days following the last day of School. In the event that the medication remains, school staff and school nurse will properly dispose of the medication.

#### ADMINISTRATION OF MEDICATION

1. Completion of a current Physician's School Medication Form/Release of Liability will be required. The written instructions will include:
  - a. Student's Name
  - b. Name of medication
  - c. Dosage
  - d. Route
  - e. Time to be administered
2. Long-Term/Short Term Medication requirements:
 

**Long-term-** A Physician's School Medication Form/Release of Liability Form signed by physician and the parent/guardian is required along with an original pharmacy labeled container that matches the physician's orders that matches the Physician's orders.

**Short-term-** An original pharmacy labeled container with a written request that includes student's name, name of medication, dosage, route, time to be given from parent/guardian that medication be given, and completion of the Release of Liability Form are required.
3. Parent/guardian must come to school to administer medication when the student missed the before school dose. School personnel are not allowed to accept telephone requests for administration of medication.

### PROTOCOL FOR ADMINISTERING AND LOGGING MEDICATIONS

Each school shall maintain a medication log. This log provides information necessary for medical protection of the students and protection of the person giving the medication. A new medication log must be established whenever a student's medication has changed i.e. dose, route, time, etc.

1. An individual medication log must be completed for each medication a student is prescribed.
2. Medication (Ex: Ritalin, Albuterol Metered dose inhaler, etc.)
3. Dosage/Route (Ex: 10-mg/1-tablet po (by mouth), 1 puff before PE, etc.
4. Time to administer or interval in cases of needed medications.
5. Initials of person(s) administering and time of administration.

#### CODES FOR MEDICATION LOG

A	If student is absent
DC	Medication Discontinued
ED	Early Dismissal
FT	Field Trip
I	Initial dose administered
NM	No medication at school
NS	No School
O	Omitted/Attempted
PA	Parent Administered
R	Refused

Once a medication has been discontinued, indicate with a "DC" and draw a horizontal line through the remaining blocks of the student's entry on the medication log and remove the student's medication from the other current medications. If a parent picks up the medication, document on the Medication Check-Out Log.

Medication forms are valid for one (1) year from the date of the physician's signature. Upon expiration it is the parents' responsibility to provide a current School Physician's Medication Form.

All medication logs and Physician's School Medication Forms must be maintained according to local protocol for a period of 20 years for elementary schools, 13 years for middle schools and 10 years for high school.

During the school day, medications need to be stored in a secure area where children don't have access and in the school vault or other locked area after school hours.

In case of a bomb threat, fire drill, etc. medication and supplies must be transported to the student assembly area.

### EMERGENCY ADMINISTRATION OF ACTIVATED CHARCOAL

School staff members are authorized to give Activated Charcoal. It binds to most poisons and lets the body pass them without harm. Activated Charcoal would be given when directed by the Poison Control Center or by physician/medical provider. Activated Charcoal will be stored with the medications. Provisions must be made to provide accessibility to the medications in case of an emergency.

Staff will follow "Protocol for Administering Activated Charcoal".

#### PROTOCOL FOR ADMINISTERING ACTIVATED CHARCOAL

1. Emergency Administration of Activated Charcoal by School Staff.
  - a. Call Poison Control Center

**CAROLINA POISON CENTER**  
**1-800-848-6946 (Charlotte, NC) or**  
**1-800-222-1222 (Charlotte, NC)**

- b. When directed by the Poison Control Center, the recommended dose of Activated Charcoal in children is 1 gram of charcoal per kilogram (1 kilogram equals 2.2 pounds of body weight). Poison Control will provide instructions on the dosage of Activated Charcoal to be administered according to student's weight. Be prepared to provide name of substance, medication history, approximate height/weight, and approximate amount of poison ingested.
- c. Additional Emergency Care will be determined by the Poison Control Center.
- d. Notify parent/guardian or other necessary parties.
- e. The only liability or responsibility assumed by the system or its personnel in the administration of Activated Charcoal is to administer the medication in accordance with accepted first-aid procedures.

#### OVER THE COUNTER DRUGS (OTC)

The use or administration of over-the-counter (OTC) drugs (nonprescription medications) to include sunscreen, insect repellent, etc. are not permitted at school, unless accompanied by a physician's school medication form. Students with major/chronic illnesses or conditions (Sickle Cell Anemia, Arthritis, Migraines, Dysmenorrhea, etc.) that necessitate PRN (as needed) medicines will be dealt with individually. Over the counter medications must have a prescription labeled container and have a completed Physician's School Medication Form/Release of Liability Form signed by the parent/guardian.

#### BEE STING/ALLERGY KITS (EPI – PEN & ANA KIT AND OTHER ER MEDICATION)

Epinephrine (Adrenalin) may be administered by injection in case of extreme medical emergency, i.e., serious life-threatening allergic reaction (anaphylaxis). Shock-like reactions can occur within minutes of exposure

to the allergen. Immediate action is necessary if the student has severe allergy symptoms such as: swelling of eyes, lips, face or throat, raised rash (hives), difficulty breathing, loss of consciousness, etc.

The following protocol will be followed when students present with allergy (ies).

1. Physician's School Medication Form is completed and emergency room medication must be labeled to match.
2. Staff training regarding the administration of emergency kit will be provided by the school nurse.
3. An emergency care plan will be completed by the school nurse.
4. It is the responsibility of the student's parent/guardian to replace used and/or expired medication.
5. Other emergency medications such as Glucagon and Benadryl will follow the steps as listed above.

#### FOOD/SUBSTANCE ALLERGIES

The most important step to preventing life threatening allergic reactions is to avoid student contact with food/substances to which they are allergic. This can be achieved by following this protocol:

1. Parents of a student with food allergies will provide a dietary order to cafeteria staff, principal and school nurse.
2. Parents of students with severe food/substance allergies must bring to school the Physician School Medication Form and appropriately prescription labeled medication to principal/medication clerk, as indicated and the School Nurse will devise an Emergency Care Plan.
3. Staff will be trained by school nurse on use of emergency medication and will receive written instructions to assist with student safety.
4. Parents of students with food/substance allergies are requested to supply classroom teacher appropriate snacks.
5. Students are to use effective hand washing techniques prior to and immediately following food consumption.
6. Parents who enroll students reporting severe food/substance allergies without healthcare documentation will be contacted by the school nurse and strongly encouraged to provide the Physicians School Medication Form, dietary order and emergency medication within 14 calendar days. In the absence of the emergency medication the school nurse will create an emergency care plan that instructs the school staff to call 911 in the event of severe allergic reaction.
7. The only responsibility or liability that can be assumed by the school system or its personnel is to comply with the instruction forwarded by the student's parent and physician. Additional information regarding liability can be found in Section I, Letter E.