

Adopted: June 5, 2006 Revised: December 17, 2013

516 STUDENT MEDICATION

I. PURPOSE

The purpose of this policy is to set forth the provisions that must be followed when administering **nonemergency** prescription and over the counter medication to students at school.

II. GENERAL STATEMENT OF POLICY

The school district acknowledges that some students may require **prescribed drugs or** medication during the school day. The school district's licensed school nurse, trained health **clerk**, principal, or teacher will administer **prescribed** medications in accordance with law and school district procedures.

III. REQUIREMENTS

- A. **Authorization** All medications (prescription and over-the-counter) to be administered at school shall have the *Authorization for Administration of Medication at School* form completed by the health professional and parent. Nurses may accept a verbal order from a physician to be followed with written authorization. Orders will be good for the school year (including the following summer sessions), but will need to be renewed at the start of a new school year. Orders will also be renewed when dosage changes occur.
- B. **Prescription Medications** Prescription medications must be in an appropriately labeled pharmacy container. The dosage listed on the pharmacy label must agree with the dosage requested by parent and prescribing health professional. When dosage changes occur, the labels will be marked with the new dosage until the next prescription refill, when a new bottle will be required. In order to provide continuity of administration for prescription medications, a nurse may allow a family two days to provide the required written authorization if a verbal or written parent request has been received.
- C. Over-the-Counter Medications Over-the-counter medications shall be in their original containers and labeled with the student's name. Health professional and parent authorization must be received before administration of over-the-counter medication.

- D. **Student Self-Carry/Administration of Prescription Medication** Under some circumstances, students may be authorized to carry and self-administer medications. Examples may include, but are not limited to, inhalers and epi-pens. A student's parent/guardian and physician will complete an *Authorization to Self-Administer Medication* form. The nurse will assess the student's knowledge and skills pertaining to his/her treatment. Self-administration will be approved if the student is considered knowledgeable and able to self-administer medication safely.
- E. Student Self-Carry/Administration of Non-Prescription Pain Relief Medication (E.g., Acetaminophen or Ibuprofen) A secondary student (grades 7-12) may possess and use nonprescription pain relief in a manner consistent with the labeling, if the school district has received written authorization from the student's parent or guardian permitting the student to self-administer the medication. The parent or guardian must submit the parent portion of the *Authorization to Self-Administer Medication* form for the student to self-administer the medication each school year. The school district may revoke a student's privilege to possess and use nonprescription pain relievers if the school district determines that the student is abusing the privilege. This provision does not apply to the possession or use of any drug or product containing ephedrine or pseudoephedrine as its sole active ingredient or as one of its active ingredients. Students are not to possess this type of medication. These medications should be processed using the same procedures as prescription medications.
- F. **Storage** All medications shall be stored in a locked cabinet, with the exception of refrigerated medications and those carried by students with special permission. Controlled substance medications will be counted (or liquid level noted) upon receipt in the health office and noted on the *Medication Administration* form.
- G. **Record Keeping** Medication administration will be recorded on a *Medication Administration* form. Dates and initials of administering personnel shall be recorded for each dose administered. Signatures and corresponding initials will be included on the form. Medication will be administered within a half-hour before or after the time indicated on the form. Administration time will also be noted for medication not given within this hour time, and any other PRN medications. Dosage changes should have a discontinued date for the old dose and the new dose with a start date. Discontinued meds should be indicated with a discontinued date and removed from the active file. Medications and dosage will be recorded by using the medication name followed by dosage in milligrams. The number of tablets or liquid measure may be included in parenthesis as an aid for non-licensed staff.
- H. **Responsibility** A registered nurse will review all new medications and all dosage changes before the initial dose is given at school. Only registered nurses may delegate the administration of medication. Health assistants to whom this responsibility is delegated will receive in-service training by the nurse regarding the medication and appropriate administration. An RN or LPN will give medications that are taken rectally or by injection. Emergency medications (Epi-pens, glucagon) will be delegated to staff only if the situation cannot be covered by an RN or LPN. In these situations, parents and administration will be consulted and a plan developed for safe storage and administration.

- I. **Field Trips** Medications to be given to students on day field trips will be pre-packaged by nurses to be administered by the delegated district employee. Sealed medication envelopes will include the student name, medication, dosage, number of pills, and time to be administered. Other PRN medication will also be sent with the responsible school personnel including any emergency plan that dictates the use of such medication. Medication to be used on overnight school trips will be provided by parents directly to the accompanying health professional or teacher.
 - J. **Return of Unused Medication** Unused medication will be returned at the end of the school year or at the time the medication is discontinued. Advance notice (postcard, phone call, or newsletter) will be given to families indicating the school plans for medication return. Parents will be asked to inform the health office if they would prefer to pick up the medication or would like the medication destroyed. Medication not picked up by the parents according to their plan will be destroyed at the end of the school year. Medication to be returned via an elementary student will be sent in a sealed bag at the end of the specified school day.
 - K. **Errors** In the event of a medication error, the parent/guardian and the school administrator will be notified by phone in a prompt manner. The student's physician will also be consulted as needed. Medication errors will be documented on a *Medication Error* form and sent to the school administrator.
 - L. **Unauthorized Use of Medication** Students observed by school personnel self-administering unauthorized medication on school grounds will be reported to parents by the school nurse or building administration. Cough drops will not be considered a medication under this policy. School protocol shall dictate the storage and use of cough drops.

M. **Specific Exceptions:**

- 1. Special health treatments and health functions such as catheterization, tracheostomy suctioning, and gastrostomy feedings do not constitute administration of drugs and medicine;
- 2. Emergency health procedures, including emergency administration of drugs and medicine are not subject to this policy;
- 3. Drugs or medicine provided or administered by a public health agency to prevent or control an illness or a disease outbreak are not governed by this policy;

Legal References: Minn. Stat. § 13.32 (Student Health Data)

Minn. Stat. § 121A.21 (Hiring of Health Personnel)

Minn. Stat. § 121A.22 (Administration of Drugs and Medicine)

Minn. Stat. § 121A.221 (Possession and Use of Asthma Inhalers by

Asthmatic Students)

Minn. Stat. § 121A.222 (Possession and Use of Nonprescription Pain

Relievers by Secondary Students)

Minn. Stat. § 121A.2205 (Possession and Use of Non-syringe Injectors of

Epinephrine; Model Policy)

Minn. Stat. § 151.212 (Label of Prescription Drug Containers)

20 U.S.C. § 1400 et seq. (Individuals with Disabilities Education

Improvement Act of 2004)

29 U.S.C. § 794 et seq. (Rehabilitation Act of 1973, § 504)

Cross References: MSBA/MASA Model Policy 418 (Drug-Free Workplace/Drug-Free School)