

Book	Policy Manual
Section	200 Pupils
Title	Medications
Code	210
Status	Draft

Purpose

The district shall not be responsible for the diagnosis and treatment of student illness. The administration of prescribed medication to a student during school hours in accordance with the direction of a parent/guardian and licensed prescriber will be permitted only when failure to take such medicine would jeopardize the health of the student or the student would not be able to attend school if the medicine were not available during school hours.

Definitions

For purposes of this policy, **medication** shall include all medicines prescribed by a licensed prescriber and any over-the-counter medicines.

For purposes of this policy, **licensed prescribers** shall include licensed physicians (M.D. and D.O.), podiatrists, dentists, optometrists, certified registered nurse practitioners and physicians assistants.

Authority

The Board directs all district employees to comply with the Pennsylvania Department of Health's Guidelines for Pennsylvania Schools for the Administration of Medications and Emergency Care.

Before any medication may be administered to or by any student during school hours, the Board shall require the written request of the parent/guardian, giving permission for such administration.[\[1\]](#)[\[2\]](#)

Delegation of Responsibility

The Superintendent or designee, in conjunction with the Certified School Nurse (CSN), shall develop administrative regulations for the administration and self-administration of students' medications.

All medications shall be administered by the Certified School Nurse, or in the absence of the Certified School Nurse by other licensed school health staff (RN, LPN), except as otherwise noted in this policy.

In the event of an emergency, a district employee may administer medication when s/he believes, in good faith, that a student needs emergency care.[\[3\]](#)

The Certified School Nurse shall collaborate with parents/guardians, district administration, faculty and staff to develop an individualized healthcare plan to best meet the needs of individual students.[\[4\]](#)[\[5\]](#)

The policy and administrative regulations for administration of medications shall be reviewed and revised as necessary.

Guidelines

The district shall inform all parents/guardians, students and staff about the policy and administrative regulations governing the administration of medications.

All standing medication orders and parental consents shall be renewed at the beginning of each school year.

Student health records shall be confidential and maintained in accordance with state and federal laws and regulations and the Department of Health Guidelines. [6][7]

Students may possess and use asthma inhalers and epinephrine auto-injectors when permitted in accordance with state law and Board policy. [8][9]

Delivery and Storage of Medications

All medication shall be brought to the nurse's office, or the main office if the nurse is in another building, by the parent/guardian or by another adult designated by the parent/guardian. All medication shall be stored in the original pharmacy-labeled container and kept in a locked cabinet designated for storage of medication. Medications that require refrigeration shall be stored and locked in a refrigerator designated only for medications. The district shall not store more than a thirty-day supply of an individual student's medication.

Medication should be recorded and logged in with the date, name of student, name of medication, amount of medication, and signatures of the parent/guardian or designated adult delivering the medication and the school health personnel receiving the medication.

Nonprescription medication must be delivered in its original packaging and labeled with the student's name.

Prescription medication shall be delivered in its original packaging and labeled with:

1. Name, address, telephone and federal DEA (Drug Enforcement Agency) number of the pharmacy.
2. Student's name.
3. Directions for use (dosage, frequency and time of administration, route, special instructions).
4. Name and registration number of the licensed prescriber.
5. Prescription serial number.
6. Date originally filled.
7. Name of medication and amount dispensed.
8. Controlled substance statement, if applicable.

All medication shall be accompanied by a completed Medication Administration Consent and Licensed Prescriber's Medication Order Form, or other written communication from the licensed prescriber.

Disposal of Medications

Procedures shall be developed for the disposal of medications consistent with the Department of Health Guidelines, which shall include:

1. Guidelines for disposal of contaminated needles or other contaminated sharp materials immediately in an appropriately labeled, puncture resistant container.
2. Processes for immediately returning to parents/guardians all discontinued and outdated medications, as well as all unused medications at the end of the school year.
3. Methods for safe and environmentally friendly disposal of medications.
4. Proper documentation of all medications returned to parents/guardians and for all medications disposed of by the Certified School Nurse or other licensed school health staff. Documentation shall include, but not be limited to, date, time, amount of medication and appropriate signatures.

Student Self-Administration of Emergency Medications

Prior to allowing a student to self-administer emergency medication, the district shall require the following:[9]

1. An order from the licensed prescriber for the medication, including a statement that it is necessary for the student to carry the medication and that the student is capable of self-administration.
2. Written parent/guardian consent.
3. An Individual Health Plan including an Emergency Care Plan.
4. The nurse shall conduct a baseline assessment of the student's health status.
5. The student shall demonstrate administration skills to the nurse and responsible behavior.

The nurse shall provide periodic and ongoing assessments of the student's self-management skills.

The student shall notify the school nurse immediately following each occurrence of self-administration of medication.

Students shall demonstrate a cooperative attitude in all aspects of self-administration of medication. Privileges for self-administration of medication will be revoked if school policies regarding self-administration are violated.

Administration of Medication During Field Trips and Other School-Sponsored Activities

The Board directs planning for field trips and other school-sponsored activities to start early in the school year and to include collaboration between administrators, teachers, nurses, appropriate parents/guardians and other designated health officials.[10]

Considerations when planning for administration of medication during field trips and other school-sponsored programs and activities shall be based on the student's individual needs and may include the following:

1. Assigning school health staff to be available.
2. Utilizing a licensed person from the school district's substitute list.
3. Contracting with a credible agency which provides temporary nursing services.
4. Utilizing licensed volunteers via formal agreement that delineates responsibilities of both the school and the individual.
5. Addressing with parent/guardian the possibility of obtaining from the licensed prescriber a temporary order to change the time of the dose.
6. Asking parent/guardian to accompany the child on the field trip, with proper clearances.
7. Arranging for medications to be provided in an original labeled container with only the amount of medication needed.

Security procedures shall be established for the handling of medication during field trips and other school-sponsored activities.

Legal

[1. 24 P.S. 510](#)

[2. 22 PA Code 12.41](#)

[3. 42 Pa. C.S.A. 8337.1](#)

4. Pol. 103.1

5. Pol. 113

[6. 24 P.S. 1409](#)

7. Pol. 216

[8. 24 P.S. 1414.1](#)

9. Pol. 210.1

10. Pol. 121

[24 P.S. 1401](#)

[24 P.S. 1402](#)

Pennsylvania Department of Health Guidelines for Pennsylvania Schools for the Administration of Medications and Emergency Care, March 2010

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