

ADMINISTERING MEDICATION

The Board shall not be responsible for the diagnosis and treatment of pupil illness. The administration of medication to a pupil during school hours will be permitted only when failure to take such medicine would jeopardize the health of the pupil, or the pupil would not be able to attend school if the medicine were not made available to him/her during school hours.

For purposes of this policy, "medication" shall include all medicines prescribed by a physician licensed to practice medicine, osteopathy or an advanced practice nurse (certified registered nurse practitioner or clinical nurse specialist) for the particular pupil, including emergency medication in the event of bee stings, food allergies, environmental allergies, etc., and all non-prescription "over the counter" medication.

Administering/Delivery of Medication By District Personnel

Before any medication may be administered to or by any pupil during school hours, the Board shall require the written request of the parent/guardian which shall give permission for such administration and relieve the Board and its employees of liability for administration of medication. In addition, the Board requires that the written order of the prescribing physician must include:

- A. The name of the pupil that requires the medication, as well as the name and purpose of the medication;
- B. The dosage and route;
- C. The time at which or the special circumstances under which medication shall be administered;
- D. The length of time for which medication is prescribed;
- E. The possible side effects of the medication;
- F. A statement that the pupil is physically fit to attend school and is free of contagious disease, if applicable; and
- G. A statement that the pupil would not be able to attend school if the medication is not administered during school hours.

Such documentation must be delivered to the Building Principal or his/her designee prior to the administration of any medication or delivery of the medication to the

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school. The Building Principal or his/her designee may consult with the school nurse and the District Physician in making the determination whether to allow or deny the request. Any approved request must be signed by the Building Principal and given to the school nurse and the pupil's parent(s)/guardian(s). Any denied request must include the reason for the denial and may be appealed to the Superintendent.

All documentation relating or regarding the administration or delivery of medication to pupils during school hours shall be kept on file in the office of the school nurse.

The District Physician, Superintendent or his/her designee shall develop procedures for the administration of medication which provide that:

- A. All medications, whether prescribed or "over the counter", shall be administered by the school nurse or substitute school nurse, the parent/guardian or the pupil himself/herself where the parent/guardian so permits and with the school nurse present;
- B. Medications shall be securely stored and kept in the original labeled container;
- C. The school nurse shall maintain a record of the name of the pupil to whom medication may be administered, the prescribing physician, the dosage and timing of medication and a notation of each instance of administration;
- D. All medications shall be brought to school by the parent/guardian or adult pupil and shall be picked up at the end of the school year or the end of the period of medication, whichever is earlier;
- E. A student may self-administer medication without supervision of the school nurse for asthma or other life-threatening illnesses. "Life-threatening illness" has been defined as an illness or condition that requires an immediate response to specific symptoms or sequelae that if left untreated may lead to potential loss of life such as, but not limited to, the use of an inhaler to treat an asthma attack or the use of an adrenaline injection to treat a potential anaphylactic reaction.

Use Of Nebulizer

Each school in the District shall have and maintain at least one nebulizer in the office of the school nurse or at a similar accessible location. The Superintendent or his/her designee shall prepare and the Board shall adopt regulations on the administration of asthma medication through the use of a nebulizer by the school nurse or his/her designee. Regulations shall be in accord with New Jersey statutes and administrative code and shall include, but not be limited to, the following:

- A. Requirement that each school nurse shall be authorized to administer asthma medication through use of a nebulizer;

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- B. Requirement that each school nurse receive training in airway management and in the use of nebulizers and inhalers consistent with nationally recognized standards;
- C. Requirement that each student authorized to use asthma medication or a nebulizer has an asthma treatment plan prepared by the student's physician, that identifies, at a minimum, asthma triggers and an individualized health care plan for meeting the medical needs of the student while attending school or a school-sponsored event.

Pupil Self-Administration of Medication

The Board shall permit self-administration of medication for asthma or other potentially life-threatening illnesses by pupils who have the capability for self-administration of medication, both on school premises during regular school hours and off-site or after regular school hours when a pupil is participating in field trips or extracurricular activities. Parents/guardians of the pupil must meet the following conditions:

- A. Provide the Board with written authorization for the pupil's self-administration of medication;
- B. Provide written certification from the pupil's physician that the pupil has asthma or another potentially life-threatening illness and is capable of and has been instructed in the proper method of self-administration of medication. The certification must also include the following information:
 - 1. The pupil's name;
 - 2. The name of the medication;
 - 3. The purpose of its administration to the pupil;
 - 4. The proper timing and dosage of the medication;
 - 5. Any possible side effects of the medication;
 - 6. The time when the medication will be discontinued;
 - 7. A statement that the pupil is physically fit to participate in all school activities and if free of contagious disease, if applicable;
 - 8. A statement that the medication must be administered on an as-needed basis during the school day or the pupil would not be able to attend school.
- C. Sign a statement acknowledging that the district shall incur no liability as a result of any injury arising from the self-administration of medication by the pupil and that the parents/guardians shall indemnify and hold harmless the district and its employees or agents against any claims arising out of the self-administration of medication by the pupil.

The Board shall:

- A. Inform the pupil and his/her parents/guardians that permission is effective for the school year for which it is granted and must be renewed for each subsequent school year upon

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fulfillment of requirements listed above;

- B. Inform parents/guardians in writing that the district and its employees or agents shall incur no liability as a result of any injury arising from the self-administration of medication;
- C. Maintain the right to revoke a pupil's permission to self-medicate if he/she has failed to comply with all conditions of this policy and/or has violated in any way the tenets of the agreement to self-medicate. The Superintendent or his/her designee shall confer with the school physician and school nurse prior to recommending termination of a pupil's permission to self-medicate and shall also consult with the pupil, the pupil's parents/guardians and the pupil's physician.

Emergency Administration of Epinephrine

The Board shall permit the school nurse -- and as detailed more fully below in the absence of the school nurse, a designee who is an employee of the Board -- to administer epinephrine via Epi-Pen or other pre-filled auto-injector mechanism in emergency situations. However, when the school nurse and delegate are unavailable, or no delegate is selected, proceed as follows:

If a pupil should suffer an anaphylactic reaction, and neither the school nurse nor the delegate is available, the emergency medical system should be activated immediately by dialing 9-1-1. Then notify a school administrator, who will call another district school nurse and parent/guardian.

The Board shall inform the pupil's parents/guardians in writing that if the specified procedures are followed, the District, its employees and agents shall have no liability as a result of any injury arising from the administration of the Epi-Pen or other pre-filled auto-injector mechanism to the pupil.

1. Parents/guardians shall provide the Board with the following:
 - a. Written orders from the pupil's physician that the pupil requires the administration of epinephrine for anaphylaxis and does not have the capability for self-administration of the medication;
 - b. Written permission for the administration of epinephrine via Epi-Pen or other pre-filled auto-injector mechanism by the school nurse or designee;
 - c. The parent must provide documentation from the physician indicating a potentially life-threatening illness. The EpiPen or other pre-filled auto-injector mechanism must be provided by the parent for their particular son or daughter.
 - d. A signed statement acknowledging their understanding that if the specified procedures are followed, the District shall have no liability as a result of any injury arising from the administration of the Epi-Pen or other pre-filled auto-injector mechanism by the school nurse or designee to the pupil, and that the

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District, its employees, and agents shall be indemnified and held harmless against any claims arising out of the administration of the Epi-Pen or other pre-filled auto-injector mechanism to the pupil.

Permission for the administration of epinephrine via Epi-Pen or other pre-filled auto-injector mechanism shall be granted annually and must be renewed each school year upon the fulfillment of the above requirements.

2. It shall be the policy of the Board that the school nurse shall have the primary responsibility for the administration of epinephrine via Epi-Pen or other pre-filled auto-injector mechanism. The school nurse may designate, in consultation with the Board or the Superintendent or his/her designee, another employee or employees of the District to administer epinephrine to a pupil via Epi-Pen or other pre-filled auto-injector mechanism for anaphylaxis, when the nurse is not physically present at the scene, provided that:

- a. The school nurse, in consultation with the Board or Superintendent or his/her designee, chooses an appropriate employee or employees following the appropriate delegation process based on established criteria;
- b. The designated person has been properly trained in the administration of epinephrine via Epi-Pen or other pre-filled auto-injector mechanism by the school nurse using standardized training protocols established by the Department of Education in consultation with the Department of Health and Senior Services;
- c. The parent or guardian of the pupil consents in writing to the administration of epinephrine via Epi-Pen or other pre-filled auto-injector mechanism by the designated individual or individuals;
- d. The school nurse, as authorized by the Board, informs the parent or guardian of the pupil in writing that if the procedures specified in this section are followed, the District its employees or agents shall have no liability as a result of any injury arising from the administration of epinephrine via Epi-Pen or other pre-filled auto-injector mechanism to the pupil;
- e. The parent or guardian of the pupil signs a statement acknowledging their understanding that if the procedures specified in this section are followed, the District shall have no liability as a result of any injury arising from the administration of epinephrine via Epi-Pen or other pre-filled auto-injector mechanism to the pupil and that the parents or guardians shall indemnify and hold harmless the district and its employees or agents against any claims arising out of the administration of epinephrine via Epi-Pen or other pre-filled auto-injector mechanism to the pupil; and
- f. The permission is effective for the school year for which it is granted and is renewed for each subsequent school year upon fulfillment of the requirements in

subsections a. through e. of this section.

Emergency Administration of Epinephrine -- Criteria for Choosing a Delegate

The school nurse may designate, in consultation with the Board of Education or Superintendent or his/her designee, another employee or employees of the school district to administer epinephrine via Epi-Pen or other pre-filled auto-injector mechanism for a pupil for anaphylaxis when the nurse is not physically present at the scene, provided that all requirements of this policy and State statutes and/or regulations are met.

When selecting a potential delegate, the following should be considered:

1. The delegate must be willing to learn the procedure for treating anaphylaxis and be willing to assume the responsibility;
2. The potential delegate has a record of competency and good judgment and can be depended upon to report to the school nurse any changes in the pupil's condition;
3. The delegate should, but is not required to, secure a CPR Providers course completion card issued by a training center of the American Heart Association or a course completion card for adult, infant, and child CPR issued by the American Red Cross;
4. The delegate must be available to assist the pupil in the environment where anaphylaxis is most likely to occur, i.e. cafeteria worker for a pupil with food allergies, playground aide for a pupil with bee sting allergies, and will successfully complete training; and
5. The task shall be delegated to only one designee, for one specific task, for one pupil. This means that the designee cannot further delegate the task to someone else. This does not mean, however, that the same designee cannot receive individual training and delegation for more than one pupil.
6. The delegate must be willing to learn the procedures set forth by the State Department of Education and follow the guidelines established in the attached training protocol.

Emergency Administration of Epinephrine -- Training the Delegate

The process of general and pupil-specific instruction for training the delegate by the school nurse includes, but is not limited to:

1. Review of written procedures;
2. Review of State Department of Education training protocols
3. Verbal directions;
4. Demonstration of procedure;
5. Return demonstration of procedure by the delegate;

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6. Directions for accessing Emergency Medical System;
7. Adverse reactions and risks;
8. Documentation of an anaphylactic episode;
9. Evaluation and documentation of the learning process; and
10. On-going supervision of the delegate.

Review of the training should occur whenever there has been a change in the student's status or after an emergency has occurred, or at a minimum, annually. Training and review processes shall be documented by the school nurse on the appropriate form.

Placement/Availability of Epinephrine, and Transportation to Hospital Emergency Room

Pursuant to P.L. 2007, C. 57, the Board of Education requires:

- A. The placement of a pupil's prescribed epinephrine in a secure but unlocked location easily accessible by the school nurse and designees to ensure prompt availability in the event of an allergic emergency at school or at a school-sponsored function. The location of the epinephrine shall be indicated on the pupil's emergency care plan. Back-up epinephrine shall also be available at the school if needed;
- B. The school nurse or designee to be promptly available on site at the school and school-sponsored functions in the event of an allergic reaction; and
- C. The transportation of the pupil to a hospital emergency room by emergency services personnel after the administration of epinephrine, even if the pupil's symptoms appear to have resolved.

Implementation

The Board may adopt additional regulations related to all aspects of the administration of medication.

When implementing school policy and P.L. 2007, C. 57, staff will consult these NJ Department of Education guidance documents:

- 1) Training Protocols for the Emergency Administration of Epinephrine (9/08); and
- 2) Guidelines for the Management of Life-Threatening Food Allergies in Schools (9/08)

Date: May 8, 2000

Reviewed/Revised: April 27, 2009

Legal References: N.J.S.A. 18A:11-1
N.J.S.A. 18A:40-1

General mandatory powers and duties
Employment of medical inspectors,

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	optometrists and nurses; salaries; terms; rules
<u>N.J.S.A. 18A:40-3.2</u>	Medical and Nursing Personnel
<u>N.J.S.A. 18A:40-4</u>	Examination for physical defects and screening of hearing of pupils
<u>N.J.S.A. 18A:40-7</u>	Exclusion of pupils who are ill
<u>N.J.S.A. 18A:40-12.3-12.4</u>	Self-administration of medication by pupil; Rules and regulations
<u>N.J.S.A. 18A:40-12.5</u>	Policy for emergency administration of epinephrine via pre-filled auto-injector mechanism to pupil
<u>N.J.S.A. 18A:40-12.6</u>	Guidelines for schools management of food allergies, administration of epinephrine
<u>N.J.S.A. 18A:40-12.7</u>	Nebulizer required in schools
<u>N.J.S.A. 18A:40-12.8</u>	Regulations for use of nebulizer in schools
<u>N.J.S.A. 18A:54-20</u>	Powers of board (county vocational schools)
<u>N.J.S.A. 45:11-23</u>	Definitions
<u>N.J.A.C. 6A:16-1.1et seq.</u>	Programs to Support Student Development
See particularly:	<u>N.J.A.C. 6A:16-1.3, -1.4(a), -2.1,-2.2, -2.3, -2.4</u>

Bernards Township Education Association v. Bernards Township Board of Education, 1981 S.L.D. (9/29/81), aff'd State Board, 1982 S.L.D. 4/7/82, aff'd App. Div., unpublished opinion (A-4211-81T3, 5/18/83)

Communications Workers of America, Local 1033, On behalf of Karen Norton, Barbara Woolston, Mary Ellen Schoen et al. v. New Jersey State Department of Education, Marie H. Katzenbach School for the Deaf, State Board Docket #52-91

Policy Advisory #1 on N.J.S.A. 18A:40-12.3 et seq. Self-Administration of Medication By a Pupil, New Jersey State Department of Education, June 5, 1995

Protocol and Implementation Plan for the Emergency Administration of Epinephrine by a Delegate Trained by the School Nurse, New Jersey State Department of Education, October, 1998

Training Protocols for the Emergency Administration of Epinephrine, New Jersey State Department of Education, September, 2008

Guidelines for the Management of Life-Threatening Food Allergies in Schools, September, 2008

<u>Possible Cross References:</u>	5131.6	Drugs, alcohol, tobacco (substance abuse)
	5141	Health

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5141.1	Accidents
5141.2	Illness
5141.3	Health examinations and immunizations
6153	Field trips

PENNSVILLE SCHOOLS
PENNSVILLE, NEW JERSEY 08070
HEALTH OFFICES

PROCEDURE FOR ANAPHYLACTIC REACTION

1. Complete an initial assessment (history, symptoms, respirations, pulse).
2. Determine need for Epi-pen.
3. Check for right medication, right child.
4. Pull off gray safety cap (illustration 1).
5. Place black tip on lateral aspect of thigh, at right angle to leg (illustration 2). (Always apply to thigh).
6. Using a quick motion, press hard into thigh until Auto-Injector mechanism functions, and hold in place for a minimum of 10 seconds. Massage the injection area for 10 seconds.
7. Call 9-1-1 with history and location.
8. Continue to assess respiratory and cardiac status. Begin CPR if appropriate.
9. Notify administrator of event, who will notify another district school nurse and parent/guardian.
10. Document medication, dose, time and place of administration.
11. Dispose of injector properly (in nonpermeable container in nurse's office).



Illustration 1

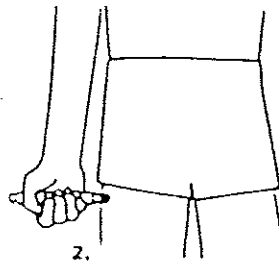


Illustration 2

POLICY & PROCEDURE FOR ADMINISTERING DIASTAT AND OXYGEN

Prepared by: Charlotte M. Humphries, MSN, APN-C

Purpose: Revision of our nursing guidelines for nursing personal (RN, LPN) for the care of students with seizure disorders. The nursing guidelines (Board Approved) in conjunction with the Nurse Practice Act are to be used when the school nurse is not available.

Policy

I. Seizure Management

1. Provide a safe environment and maintain a patent airway.
2. Provide the student with privacy.
3. Position student on his side.
4. Time seizures
 - a. Three minutes or greater administer Diastat as prescribed and directed by the physician and call 911.

Procedure ***Parents called

1. Remove protective cover from syringe.
2. Lubricate rectal tip with lubricating jelly.
3. Turn student on his/her side if not already positioned.
4. Expose and separate buttocks
5. Gently insert syringe tip into the rectum
6. Slowly push plunger of syringe in releasing the medication.
7. Remove syringe and hold buttocks together and count to three slowly.
8. Maintain side positioning.
5. Document time, dosage and response.
6. Continue to monitor the status of the student as well as vital signs.
7. Notify school nurse and principal.
8. Verbal report of incident given to School Nurse.

II. Administration of Oxygen

A. Use

1. Shortness of breath and color changes associated such as; cyanosis, ashen, mottled, etc.

B. Method

- | | |
|---------------------------|-----------|
| 1. Nasal cannula | 4-6 l/min |
| 2. O2 mask | 10 l/min |
| 3. O2 non-rebreather mask | 10+ l/min |

C. Procedure ***Parents are notified

1. Crack cylinder open and check oxygen pressure. Full tank is 2000psi.
2. Attach desired tubing to oxygen tank.
3. Turn dial on side to the desired liter flow.
4. Place oxygen mask/cannula on face
5. Monitor respiratory status.
6. Document type of mask, liter flow and response.
7. If student continues to have respiratory difficulty call 911.
8. Notify school nurse and principal.