

Policy:**MEDICATION ADMINISTRATION AT SCHOOL: PRESCRIPTION & NON-PRESCRIPTION** Rev 6-13

Purpose: To provide the student a safe and consistent environment for medication administration for acute &/or chronic illness in the school setting, facilitating student attendance, allowing participation in education.

Each OCS Health Room is not, nor is intended to be, a full service clinic or treatment center, or a substitute for the primary health care provider. Rather the primary function is to provide basic First Aid and administer medications according to this policy. Each OCS Health Room is staffed by a Health Room Assistant who has been trained by the School Health RN to provide this limited scope of service. The School Health RN serves as a health care consultant and might not be the direct care provider, except in circumstances that cannot be delegated to a Health Room Technician. The School Health RN also serves as School Health Coordinator and directs and supervises School Health Services at each of the OCS Campuses.

1. GENERAL GUIDELINES

- a. All medications will be accepted on an individual basis at the discretion of the School RN.
- b. All medications administered at school will be given by the School Health Tech, School Nurse, or Principal-designated trained OCS personnel
- c. First dose of medication or dosage change is recommended to be given at home
- d. Two medications must not be mixed in the same bottle.
- e. A medication (even if identical) will NOT be “borrowed” from a child for use by a sibling
- f. Ear and eye drops for QID (four times a day) should be given by parent/guardian/adult unless a health care provider is on site or School Nurse makes specific exception.
- g. No products containing aspirin (ASA, Acetylsalicylic acid, salicylates) will be given without a physician’s order
- h. OCS School Health Staff will not administer any medications containing narcotics (i.e. Lortab, Codeine, Tylenol #3, etc.) except when identified in an individual care plan for chronically ill students.
- i. Herbal Medications and nutritional supplements will not be administered by any of OCS Staff
- j. Student will be provided privacy for medication administration and any information will be kept confidential according to the Family Right & Privacy Act (FERPA)
- k. Students are to be supervised while taking ANY medication
- l. Parent/Guardian will be notified if:
- m. Parent/guardian will be contacted if
 - i. temperature is ≥ 100.4 F, if complaint continues, or if complaint increases after intervention
 - i. Frequent requests/frequent visits to Health Room
 - ii. If medication could not be given as requested/prescribed (i.e. refused, spilled, vomited, lost)

2. PRESCRIPTION MEDICATION

- a. Must be provided by the parent/guardian
- b. Prescription medication cannot be administered without the appropriate health care provider’s order (licensed physician, nurse practitioner, physician assistant, or dentist who has the responsibility for the medical management of the student).
 - i. **The prescription container shall serve as the prescriber’s original order since the prescription is on file at the pharmacy.**
- c. No sample medications will be given unless accompanied by a written order from the prescribing health care provider.
- d. Medication, including samples, must be received in original container, with the intact prescription label attached, containing the following:
 - i. Student’s name
 - ii. Date
 - iii. Prescribing physician
 - iv. Dosage/strength
 - v. Directions for use (including frequency & duration)
 - vi. Pharmacy name and address

- vii. Those with altered or changed labels will not be accepted.
 - e. **Controlled medication** (i.e. medications for ADD/ADHD) will be counted and verified by both the parent/guardian and designated OCS school personnel when the medication is brought in to the school, requiring both individuals to initial the consent form or MAR, verifying the correct count. The medication count and initials are to be entered on the “Consent and Release for Administration of Prescription and Non-Prescription Medication Brought from Home to be Administered at School” when medication is brought in to the school initially, then on MAR for subsequent refills are brought into the school. Antibiotics and steroid type meds do not need counting.
 - f. Prescription medications, such as antibiotics, directed to be given two or three times a day should be administered entirely at home. An exception may be made by the School Nurse if the student is in the After School Program or will remain after regular school hours for a school-sponsored activity/function, if designated staffing is available
3. **NON-PRESCRIPTION MEDICATION FROM HOME**
 - a. Must be provided by the parent/guardian
 - b. Must be received in original container
 - c. Medication must match the container’s label
 - d. Label must be intact with information of indications and directions included.
 - e. May not be given no more than 3 consecutive days without a written physician’s order
4. **NON-PRESCRIPTION MEDICATION PROVIDED BY THE SCHOOL:**
 - a. A limited supply stock of non-prescription/over-the-counter symptom-specific medications may be available at the school during the current school year.
 - b. This listing of specific non-prescription/over-the-counter medications, which is in accordance with the manufacturer’s guidelines, is Pediatrician reviewed, approved, and renewed yearly
5. **CONSENT**
 - a. **Prescription Medications & Non-Prescription Medication from Home**
 - i. Written request from Parent/Guardian must be accompanied by either a completed & signed copy of the “Consent and Release for Administration of Prescription & Non-Prescription Medication brought from Home to be Administered at School” (valid for current school year only) or a written and signed note from the parent/guardian
 - ii. The parent/guardian written note giving consent must include:
 1. Student’s name (first and last)
 2. Name of medication
 3. Dosage (not to exceed the recommended dosage)
 4. Date, time, & indications of medication is to be administered
 5. Parent/Guardian signature
 - iii. The written consent must be given to the School Secretary, School Health Tech, or School RN when medication is brought in to the school or the medication cannot be given by OCS staff.
 - b. **For Non-Prescription Medications provided by the Schools:**
 - i. Parent/Guardian must submit a completed & signed copy of “Consent for Non-Prescription Medications Provided by the School” (valid for current school year only)
 - ii. Parent/Guardian will indicate on the above-mentioned consent, which specified non-prescription/over-the-counter medication(s) the student is permitted to receive on an “as needed” basis during the current academic year.
 - iii. Consent authorizes the administration of the specified non-prescription/over-the-counter medication(s) for signs, symptoms, &/or complaints that student may have, without having to contact parent/guardian each time the specified medication is requested by student.
 - iv. Verbal Consent from Parent/Guardian for item not marked as consented to on the original “Consent for Non-Prescription Medications Provided by the School” may be

accepted if verbal consent is witnessed by 2 staff members (i.e., School Nurse, School Health Tech, OCS Staff), documenting date, time, & circumstances of verbal consent.

- v. Refer to #13 for policy regarding administration of Benadryl by the school

6. **SELF-ADMINISTRATION**

- a. All medications administered at school will be given by the School Health Tech, School Nurse, or Principal-designated trained OCS personnel
- b. Students will be supervised while taking ANY medication
- c. All student of OCS, regardless of age, are NOT allowed to self medicate &/or NOT allowed to carry or have in their possession any medication during school hours &/or while on OCS property
 - i. **Please note for OCMS and OCHS students only:** OCMS & OCHS students may keep in their possession life saving medication where time is of the essence, specifically, ASTHMA INHALERS, EPI-PENS, & DIABETIC MEDICATIONS/SUPPLIES if a signed School Health Plan of Care is in place in Health Office and written consent has been obtained from the parent/guardian, student, School Nurse, & Physician. Students who demonstrate an inability to manage self-medication properly will not be allowed to continue this practice.

7. **CHANGES IN MEDICATION**

- a. The order and/or consent will be kept current as changes in dosage or dose times occur. All changes must be documented in writing from the physician and/or a parent note with a new prescription bottle & consent
- b. It is the parent's responsibility to report any medication changes to the School Nurse or School Health Tech

8. **TRANSPORTATION, RETRIEVAL, & DISPOSAL**

- a. Parent/Guardian may cancel medication request at any time &/or retrieve their student's medication from the school at any time
- b. All medications must be picked up from the school by a **parent/guardian**
 - i. **Medications are NOT allowed on the Daviess County School System Buses at any time**
 - ii. Exception to this rule are lifesaving medications such as asthma inhalers, Epi-pens, Diastat, & diabetic medications/supplies
 - iii. **NON-BUS RIDING OCHS STUDETNS ONLY:** OCHS Students may obtain his/her medication at afternoon dismissal if the student is immediately leaving OCHS premises after designated OCS staff notifies & obtains parent/guardian consent
- c. Medications will be disposed of as witnessed, documented, and signed by 2 OCS staff members in the event of the following:
 - i. Medication (including expired) not picked up by the parent/guardian within 10 days of school closing (If parent did not direct the medication to be sent to the subsequent OCS school location)
 - i. Non-Prescription medications without a physician's order not picked up 10 days after receipt
 - ii. Unclaimed medication
- d. A courtesy note may be sent home with the student as a parent reminder for notification of expired medications at school, refill notification for medications to be given at school, or notification to pick up medication from the school.

9. **MEDICATION REFUSAL**

- a. Student:
 - i. If a student refuses to take medication or is uncooperative during medication administration, the parent/guardian will be contacted and medication administration may be omitted.
 - ii. A conference will be scheduled with the parent/guardian to resolve the conflict
- b. School Nurse:
 - i. All medications will be accepted on an individual basis at the discretion of the School Nurse

- ii. The School Nurse has the right to refuse to administer any medication the nurse believes is not in the best interest of the student, due to dosage, side effects, or other concerns. A conference will be scheduled with the parent/guardian for discussion

10. **MEDICATION STORAGE**

- a. Medications will be kept at proper temperature in a secured locked, clean container or cabinet accessible only to the responsible authorized school personnel.
- b. Medications will be stored after school hours in a secured locked area.
- c. Expiration dates on any medications present in OCS Health Room will be checked on routine basis. Parent/Guardian will be notified of out-dated medications to obtain replacement.

11. **MEDICATION ADMINISTRATION TO OCS EMPLOYEES**

- a. At the discretion of the school nurse and building principal, appropriate non-prescription/OTC medications may be available to OCS employees
- b. Medication may not be administered to anyone not employed by OCS (i.e. parent, volunteer, vendor, etc)
- c. The school nurse may not administer allergy shots or other non-emergency injectable medication to OCS employees

12. **DOCUMENTATION**—Any medication administered will be documented after it has been given to the student as directed.

13. **Oral Benadryl Protocol for Hypersensitivity Reaction Signs & Symptoms**

14. **Protocol for Emergency Medications for Hypersensitivity Reaction**

For The Student with No Known &/or Prior Hypersensitivity Reaction/Anaphylaxis

School-stock epinephrine by auto-injector and oral Benadryl (or generic equivalent) will be available at your child’s school & will be an option for you to choose for your child if any of the following signs/symptoms are present. Hypersensitivity reaction is a potentially fatal allergic reaction occurring within seconds to minutes after exposure to an antigen. Common antigens are penicillin and other antibiotics; biologicals, such as serums, vaccines, tetanus, toxoid; injectable or oral medications; insect bites or stings; foods; allergy extracts; latex exposure; blood transfusions; narcotics, etc. For example, your child may have never been allergic to bees or nuts previously, but after stepping on a bee or eating a peanut butter sandwich, the once non-allergic child may immediately start having symptoms of an allergic reaction. Reactions can range from mild (i.e. rash) to severe (i.e. anaphylaxis/death). Epinephrine by auto-injector and oral Benadryl (or generic equivalent) would be given to help treat the child’s allergic reaction while awaiting the arrival of EMS.

***Severity of symptoms can change quickly.**

All symptoms can potentially progress to a life-threatening situation

Hypersensitivity reaction symptoms may include :

MOUTH	Itching, Tingling Sensation in the Mouth, Swelling of the Lips, Tongue, Mouth
*THROAT	Itching &/or Complains of Tightness in the Throat, Hoarseness, Hacking Cough, Nasal Congestion
SKIN	Hives, Rash, Complaints of Feeling Itchy, Flushing &/or Swelling about the Face or Extremities, Bluish Skin Color
GUT	Nausea/Vomiting and/or Abdominal Cramps, Diarrhea
*LUNGS	Tightness in Chest, Shortness of Breath, Repetitive Coughing &/or Wheezing, Shallow Respirations
*HEART	Chest Pain, Drop in Blood Pressure, Weak or Thready Pulse
MOOD	Irritable, Anxious, Restless, Feeling of Apprehension, Loss of Consciousness, Weakness or Dizziness, Seizure

Treatment:

Emergency Use of Epinephrine by Auto-Injector:

EPINEPHRINE BY AUTO-INJECTOR Protocol		
**If in doubt of child's weight, use epinephrine by auto injector 0.3 mg dose		
<i>AGE/WEIGHT</i>	<i>DOSE</i>	<i>INDICATIONS</i>
Child weighing approximately \leq 66 pounds	Pre-set by auto injector 0.15 mg	Inject immediately to outer thigh if needed for severe hypersensitivity/anaphylactic reaction symptoms
Child weighing approximately \geq 66 pounds thru adult	Pre-set by auto injector 0.3 mg	Inject immediately to outer thigh if needed for severe hypersensitivity/anaphylactic reaction symptoms

Emergency Use of Oral Benadryl:

ORAL BENADRYL Protocol (or generic equivalent diphenhydramine) LIQUID= 12.5 mg per 1 teaspoon		
**Oral Benadryl will not be given unless the student is fully awake, able to sit up, able to talk, & able to swallow.		
<i>AGE/WEIGHT</i>	<i>DOSE</i>	<i>INDICATIONS</i>
Children 6-12 yrs (48-95 pounds)	1-2 teaspoons	every 4 hours as needed for hypersensitivity reaction symptoms
Children \geq 12 yrs (\geq 96 pounds)	2-4 teaspoons	every 4 hours as needed for hypersensitivity reaction symptoms

Parent/guardian will be contacted if emergency medications are given to student for any of the above mentioned symptoms. EMS will also be summoned if epinephrine by auto-injector is administered. Student will be continuously monitored by OCS staff until Parent/Guardian &/or EMS arrives to assume care of student. By documenting your consent on the "Consent for Non-Prescription Medications Provided by the School," you are giving your authorization for your child to receive the specified non-prescription/over-the-counter medication(s) on an "as needed" basis during the current academic year, in accordance with the manufacturer and pediatric guidelines, as indicated by signs, symptoms, &/or complaints that your child may have.