

Administering Medications (Epinephrine)

By AUTO-INJECTOR

In Life-Threatening Situations

A Training Program for School Personnel

Stamford High School

Program Instructors:

C. Greenhill

I. Sequerra

OUTLINE OF TRAINING PROGRAM FOR SCHOOL PERSONNEL TO ADMINISTER EPINEPHRINE BY AUTO-INJECTOR IN LIFE-THREATENING SITUATIONS

Purpose: To provide certified school personnel with the basic knowledge and skills to administer epinephrine by auto-injector in a life-threatening situation

To provide school personnel with the basic knowledge and skills to recognize and initiate emergency response protocol.

Instructor: School Nurse

Objectives: Upon completion of the training the participants will demonstrate the following competencies

1. Identify common causes of allergic emergencies;
2. accurately recognize general and student-specific warning signs of allergic emergency;
3. accurately identify student for whom the epinephrine is prescribed;
4. accurately read and interpret the emergency medication administration plan;*
5. correctly follow directions on the medication administration plan;*
6. accurately read the epinephrine label and follow directions from the label;*
7. administer epinephrine by auto-injector;*
8. safely handle epinephrine in an auto-injector;*
9. accurately describe the school's plan for responding to emergencies;
10. access resources appropriately, including emergency medical services, school nurse, parents, and physician;

* certified school staff

CT State of Education – Administration of Medications

Sec. 10-212a. Administration of medications in schools and at athletic events. Regulations.

(a)(1) A school nurse or, in the absence of such nurse, any other nurse licensed pursuant to the provisions of chapter 378, including a nurse employed by, or providing services under the direction of a local or regional board of education at, a school-based health clinic, who shall administer medical preparations only to students enrolled in such school-based health clinic in the absence of a school nurse, the principal, any teacher, licensed physical or occupational therapist employed by a school district, or coach of intramural and interscholastic athletics of a school may administer, subject to the provisions of subdivision (2) of this subsection, medicinal preparations, including such controlled drugs as the Commissioner of Consumer Protection may, by regulation, designate, to any student at such school pursuant to the written order of a physician licensed to practice medicine or a dentist licensed to practice dental medicine in this or another state, or an advanced practice registered nurse licensed to prescribe in accordance with section 20-94a, or a physician assistant licensed to prescribe in accordance with section 20-12d, and the written authorization of a parent or guardian of such child. The administration of medicinal preparations by a nurse licensed pursuant to the provisions of chapter 378, a principal, teacher, licensed physical or occupational therapist employed by a school district, or coach shall be under the general supervision of a school nurse. No such school nurse or other nurse, principal, teacher, licensed physical or occupational therapist employed by a school district, coach or school paraprofessional administering medication pursuant to subsection (d) of this section shall be liable to such student or a parent or guardian of such student for civil damages for any personal injuries which result from acts or omissions of such school nurse or other nurse, principal, teacher, licensed physical or occupational therapist employed by a school district, coach or school paraprofessional administering medication pursuant to subsection (d) of this section in administering such preparations which may constitute ordinary negligence. This immunity shall not apply to acts or omissions constituting gross, willful or wanton negligence.

(2) Each local and regional board of education that allows a school nurse or, in the absence of such nurse, any other nurse licensed pursuant to the provisions of chapter 378, including a nurse employed by, or providing services under the direction of a local or regional board of education at, a school-based health clinic, who shall administer medical preparations only to students enrolled in such school-based health clinic in the absence of a school nurse, the principal, any teacher, licensed physical or occupational therapist employed by a school district, or coach of intramural and interscholastic athletics of a school to administer medicine or that allows a student to self-administer medicine shall adopt written policies and procedures, in accordance with this section and the regulations adopted pursuant to subsection (c) of this section, that shall be approved by the school medical advisor or other qualified licensed physician. Once so approved, such administration of medication shall be in accordance with such policies and procedures.

(b) Each school wherein any controlled drug is administered under the provisions of this section shall keep such records thereof as are required of hospitals under the provisions of subsections (f) and (h) of section 21a-254 and shall store such drug in such manner as the Commissioner of Consumer Protection shall, by regulation, require.

(c) The State Board of Education, in consultation with the Commissioner of Public Health, may adopt regulations, in accordance with the provisions of chapter 54, as determined to be necessary by the board to carry out the provisions of this section, including, but not limited to, regulations that (1) specify conditions under which a coach of intramural and interscholastic athletics may administer medicinal preparations, including controlled drugs specified in the regulations adopted by the commissioner, to a child participating in such intramural and interscholastic athletics, (2) specify conditions and procedures for the administration of medication by school personnel to students, and (3) specify conditions for self-administration of medication by students. The regulations shall require authorization pursuant to: (A) The written order of a physician licensed to practice medicine or a dentist licensed to practice dental medicine in this or another state, an advanced practice registered nurse licensed under chapter 378, a physician assistant licensed under chapter 370, a podiatrist licensed under chapter 375 or an optometrist licensed under chapter 380; and (B) the written authorization of a parent or guardian of such child.

(d) (1) With the written authorization of a student's parents, and (2) pursuant to the written order of the student's (A) physician licensed to practice medicine, (B) an advanced practice registered nurse licensed to prescribe in accordance with section 20-94a, or (C) a physician assistant licensed to prescribe in accordance with section 20-12d, a school nurse and a school medical advisor may jointly approve and provide general supervision to an identified school paraprofessional to administer medication, including, but not limited to, medication administered with a cartridge injector, to a specific student with a medically diagnosed allergic condition that may require prompt treatment in order to protect the student against serious harm or death. For purposes of this subsection, "cartridge injector" means an automatic prefilled cartridge injector or similar automatic injectable equipment used to deliver epinephrine in a standard dose for emergency first aid response to allergic reactions.

Regulations

In the absence of a licensed nurse, only principals and teachers who have been properly trained may administer medications to students. Principals and teachers may administer oral, topical, or inhalant medications. Injectable medications may be administered by a principal or teacher only to a student with a medically diagnosed allergic condition which may require prompt treatment to protect the student against serious harm or death. Investigational drugs may not be administered by principals or teachers.

I. Anaphylaxis: Definition and Recognition

(a) Definition - Anaphylaxis is a sudden allergic reaction that may involve the skin, the respiratory tract, gastrointestinal tract and in some cases, the cardiovascular system. In children attending school, anaphylaxis is generally the result of allergic reactions to foods, insect stings, or rarely, medications. While the majority of these reactions are self-limited or respond readily to early medical intervention, fatal anaphylactic reactions have been reported. Children with asthma are at greatest risk of severe anaphylactic reactions.

(b) Recognition - Signs and symptoms of anaphylaxis vary considerably from patient to patient but frequently begin with a tingling sensation, itching, or metallic taste in the mouth followed by itching and tightness in the throat, hives and/or generalized swelling of the face and extremities. A sensation of “air hunger” and wheezing, nausea, abdominal cramps and vomiting, a drop in blood pressure and loss of consciousness may follow this. Onset of symptoms may be within minutes or delayed up to one hour and the time course of the reaction may follow one of three patterns; uniphasic with rapid progression of systems, biphasic with early symptoms followed by apparent resolution for one to two hours and then rapid development of respiratory symptoms and/or hypotension, or uniphasic with protracted symptoms despite medical management.

When to Use Your EpiPen® Auto-Injector

Make sure you speak with your health care professional about how to identify the signs and symptoms of an allergic emergency. If you, your child or someone you're caring for shows signs or symptoms of an allergic emergency, inject the health care professional-prescribed EpiPen or EpiPen Jr. immediately, then promptly call 911 and seek immediate medical attention. Signs of an allergic emergency may include:

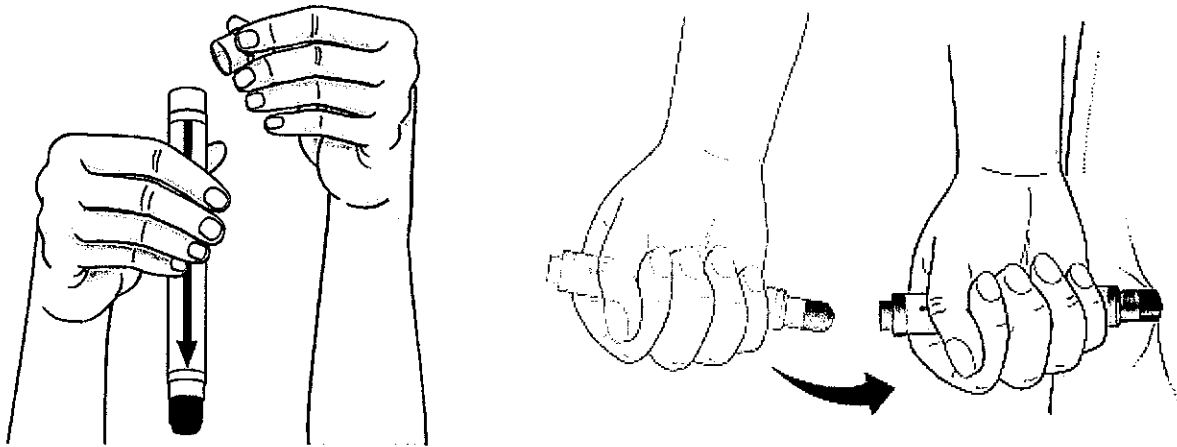
- Closing of your breathing airways
- Wheezing
- Sneezing
- Hoarseness
- Hives
- Itching
- Swelling of the lips, tongue
- Numbness or tingling of the lips or tongue
- Skin redness
- Fast heartbeat
- Weak pulse
- Feeling very anxious
- Confusion
- Stomach pain
- Losing control of urine or bowel movements (incontinence)
- Faintness or "passing out" (unconsciousness)

Don't be afraid to use the EpiPen Auto-Injector during an allergic emergency. Using it at the start of such an emergency may prevent the reaction from becoming worse. Remember, the EpiPen Auto-Injector is not a substitute for emergency medical treatment.

There are no absolute contraindications to using EpiPen Auto-Injectors in a life-threatening severe allergic reaction. People with certain medical conditions have a higher chance of having serious side effects from EpiPen Auto-Injector. The EpiPen Auto-Injector should be used with caution if you have heart disease, high blood pressure, thyroid conditions or diabetes, or if you are pregnant or take medicines that can cause heart-related symptoms. These conditions should be discussed with your health care professional.

DIRECTIONS FOR USING THE EPIPEN Jr. AUTO-INJECTOR

1. Pull off safety cap (see illustration).
2. Place black tip on thigh at right angle to leg. Always apply to thigh. (see illustration)
3. **Using a quick motion**, press hard into thigh until Auto-Injector mechanism functions, and hold in place for several seconds. The EpiPen Jr. unit should then be removed and discarded. Massage the injection area for ten seconds afterwards.



EpiPen Locations – Stamford High School

1. Cafeteria
2. Gym
3. Mr. Manka's Office – 7th Floor

AED LOCATIONS - An automated external defibrillator or AED is a portable electronic device that automatically diagnoses the potentially life threatening cardiac arrhythmias of ventricular fibrillation and ventricular tachycardia in a patient, and is able to treat them through defibrillation, the application of electrical therapy which stops the arrhythmia, allowing the heart to reestablish an effective rhythm. With simple audio and visual commands, AEDs are designed to be simple to use for the layman, and the use of AEDs is taught in many first aid, first responder, and basic life support (BLS) level CPR classes.

1st Floor – By Main Office

4th Floor – By elevator near custodians (Use elevator key to open)

Cafeteria – By Exit Ramp

Gym – By water fountain

NO AED in the NEW BUILDING (7,8 & 9th Floors)



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EPINEPHRINE COMPETENCY SKILL CHECK LIST

Name and Title of Staff Person: _____

Staff person has demonstrated the following competencies:

States the responsibilities of the school nurse for training and supervision _____

Identifies common causes of allergic response _____

Describes general and student-specific warning signs of allergic emergency _____

Demonstrates how to activate the school's plan for responding to emergency _____

Identifies student for whom the epinephrine is prescribed _____

Interprets accurately the emergency medication administration plan _____

Follows the directions on the medication administration plan _____

Read the label on the epinephrine auto-injector assuring correct dosage _____

Describes how to access emergency medical services, school nurse, and students
 Parents (or other persons) and student's physician _____

Identifies the location of all Epi-Pens in the school building and is capable
 of immediately accessing same at any time.

Signatures: Supervised by _____, RN

Staff Person: _____

Date: _____