MEDICATION

1.0 Medications at School. Each school principal shall authorize an employee(s) to administer prescription or non-prescription medications: oral, topical, nasal, eye drops, and/or ear drops. Oral medications are administered by mouth either by swallowing or inhaling and may include administration by mask if the mask covers the mouth or mouth and nose. These designated staff members will participate in an in-service training session conducted by a registered nurse each school year and will be supervised by the school nurses.

Prescribed or over-the-counter oral medication may be dispensed to students on a scheduled or as needed basis upon written authorization from a parent with a written request by a licensed health professional prescribing within the scope of his/her prescriptive authority. Requests shall be valid for not more than the current school year. The prescription or non-prescription medication must be properly labeled, in the original container, and not expired.

2.0 Medication Administration. Non-emergency injections and suppositories may not be administered by school staff other than registered nurses and licensed practical nurses. No medication will be administered by injection by school staff except when a student is susceptible to a predetermined, life-endangering situation. In such an instance for anaphylaxis or asthma, the parent shall submit a written statement which grants a staff member the authority to act according to specific written orders. In addition the licensed health professional provides supporting directions while prescribing within his or her prescriptive authority (e.g., medication administered to counteract a reaction to a bee sting). Such medication shall be administered by a registered nurse, a licensed practical nurse, or a staff trained by the supervising school nurse to administer such an injection.

The designated person administering the prescription or non-prescription medication shall:

2.1 Collect the medication directly from the parent/guardian/custodian (students should not transport medication to school), collect an authorization form signed by the parent/guardian/custodian and prescribing licensed health provider and collect instructions from the prescribing licensed health provider if the medication is to be administered for more than fifteen consecutive days;

2.2 Not give any new medication until reviewed by the school nurse;

2.3 Store the prescription or non-prescribed medication in a locked, substantially constructed cabinet;
2.4 Maintain a daily record which indicates that the prescribed or non-prescribed medication was administered;

2.5 Provide a copy of the Medication Policy-3416 to the parent upon request.

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3.0 Nasal Medications. If a school nurse is on the premises, a nasal spray that is a legend drug (prescription, not over-the-counter medication, i.e. intranasal midazolam) or a controlled substance must be administered by the school nurse. School nurses may delegate emergency nasal medication (i.e. intranasal midazolam) according to RCW 28A.210.260 if the nurses’ clinical judgment considers this safe practice. Nasal spray medications may also be administered by a Parent Designated Adult (PDA). A PDA is a volunteer, who may be a school district employee, who receives additional training from a healthcare professional or expert in epileptic seizure care, selected by the parents/guardians, who provides care for the student consistent with the student’s individual health plan on file with the school.

4.0 Required Notification of Emergency Medical Services (EMS). After every administration of any legend (prescribed) drug or controlled substance by nasal spray to a student by a school employee who is not a school nurse, Emergency Medical Services (911) will be summoned as soon as practicable.

5.0 Self-Carry and Self-Administer Medication by Student. If a health professional and a student’s parent request that a student be permitted to carry his or her own medication and/or be permitted to self-administer the medication, the principal may grant permission after consulting with the school nurse. The process for requesting and providing instructions shall be the same as established for medications: oral, topical, nasal, eye drops, ear drops, and injections. The principal and nurse shall take into account the age, maturity and capability of the student, the nature of the medication, the circumstances under which the student will or may have to self-administer the medication and other issues relevant in the specific case before authorizing a student to carry and/or self-administer medication at school. Except in the case of multi-dose devices (like asthma inhalers), students shall only carry one day’s supply of medication at a time. Violations of any conditions placed on the student permitted to carry and/or self-administer his or her own medication may result in termination of that permission, as well as the imposition of discipline when appropriate.

5.1 For a student to self-carry a daily dose of medication for the entire school year, a health professional and a student’s parent must both complete and sign the medication request form and grant permission for the student to carry his/her own medication.

5.2 Permission to self-carry a one day supply of over-the-counter medication for the duration of 15 days or less may be granted by the parent and must have permission from the school principal and school nurse. This is the only exception, where a Licensed Health Professional signature is not required. The medication must be stored in the original container, unexpired, clearly labeled with the student’s name, name and strength of medication, dosage, and time of day for administration.
5.3 In the event of a multi-day school sponsored off campus activity, a student may carry a multi-day supply of medication, limited to the duration of the trip and with approval from the nurse, parent, and administrator. Prescription medication administration requires a medication request form completed by the provider and parent.