University of Chicago Laboratory Schools Undesignated Albuterol Policy

I. Purpose
The purpose of this policy is to establish guidelines and procedures governing the use of undesignated albuterol administered by school nurses at the University of Chicago Laboratory Schools. Undesignated albuterol means albuterol prescribed in the name of the University of Chicago Laboratory Schools. Albuterol is a short-acting bronchodilator that is approved by the United States Food and Drug Administration for the treatment of respiratory distress.

II. Policy
Per 105 ILCS 5/22-30, it is the policy of the University of Chicago Laboratory Schools that it shall provide and maintain on-site at the Historic Campus and Earl Shapiro Hall undesignated albuterol. The school nurse may (1) provide undesignated albuterol to a student for self-administration only or to any personnel authorized under a student's Individual Health Care Action Plan or asthma action plan, plan pursuant to Section 504 of the federal Rehabilitation Act of 1973, or individualized education program plan to administer to the student that meets the student's prescription on file; (2) administer undesignated albuterol that meets the prescription on file to any student who has an Individual Health Care Action Plan or asthma action plan, plan pursuant to Section 504 of the federal Rehabilitation Act of 1973, or individualized education program plan that authorizes the use of asthma medication; and (3) administer undesignated albuterol to any person that the school nurse or trained personnel believes in good faith is having respiratory distress.

The school nurse may administer undesignated albuterol to any person whom the school nurse in good faith believes to be experiencing respiratory distress while in school, while at a school-sponsored activity, while under the supervision of school personnel, or before or after normal school activities, including before-school or after-school care on school-operated property. A school nurse may carry undesignated asthma medication on his or her person while in school or at a school-sponsored activity.
The University of Chicago Laboratory Schools and its employees and agents are to incur no liability or professional discipline, except for willful and wanton conduct, as a result of any injury arising from the administration of undesignated albuterol regardless of whether authorization was given by a student's parents or guardians or by the student's physician, physician assistant, or advanced practice registered nurse. The school nurse shall accept a written or email request from a parent or guardian stating that their student shall not be administered undesignated albuterol under any circumstances. This policy is communicated to parents and guardians in the division handbooks.

III. Training
Prior to the administration of undesignated albuterol, school nurses will submit proof of completion of a training curriculum to the lead nurse. The training curriculum will address how to recognize and respond to respiratory distress, and meet the following requirements:

1. how to recognize symptoms of respiratory distress and how to distinguish respiratory distress from anaphylaxis;
2. how to respond to an emergency involving respiratory distress;
3. asthma medication dosage and administration;
4. Lab’s written Asthma Episode Emergency Response Protocol;
5. the importance of calling 9-1-1 or, if 9-1-1 is not available, other local emergency medical services;
6. a test demonstrating competency of the knowledge required to recognize respiratory distress and administer asthma medication

Training will also include:

1. where the undesignated albuterol is stored and how to access the drug;
2. the method by which the school nurse will be notified of an incident that could require the administration of undesignated albuterol and
3. the process for administering the specific undesignated albuterol identified in the standing order.

IV. Procurement of Albuterol
a. The school nurse will be responsible for the procurement of undesignated albuterol. The school lead nurse shall prepare standing orders and update annually.
b. The school nurse should have the following supplies:
   i. Albuterol HFA 90 mcg/inh
   ii. Reusable or disposable spacer
   iii. Written instructions

V. Storage
1. Albuterol will be clearly marked and stored in the exam rooms of the ESH (104), Blaine (S112) and U-High (C-124) Nurse Offices. It will not be accessible to students. The standing protocol for administering albuterol will be kept near the albuterol.
2. Albuterol will be stored in accordance with the manufacturer's instructions. It will be stored in a place that is protected from direct sunlight and freezing temperatures. In general, the medication should be kept between 36 to 77 degrees Fahrenheit.
3. Inspection of the albuterol shall be conducted regularly, including tracking the expiration date found on the box and inhaler.

VI. Use
Check for signs of respiratory distress. Respiratory distress is the presence of wheezing, coughing, shortness of breath, chest tightness or any other symptoms consistent with asthma.

- Early warning signs of respiratory distress include:
  - Exposure to known trigger
  - Shortness of breath
  - Cough
  - Wheeze
  - Tight chest
  - Trouble breathing with exercise

- Respiratory distress is getting worse if you observe:
  - Breathing is hard and fast
  - Retraction (sucking in at ribs and neck)
  - Nostrils opened wide
  - Blue or gray lips and nail beds
  - Trouble walking
  - Medication is not helping within 15-20 minutes
  - Trouble talking
The signs and symptoms of respiratory distress may vary among individuals. The progression of symptoms is also not always linear, so it is very important to monitor the individual, know the different levels of warning signs, and respond promptly.

If respiratory distress is present, follow the Standard Procedures and Protocols for Emergency Use:

If a student presents with symptoms in the caution zone:
1. Assess the student for asthma episode symptoms;
2. Call the student’s parent or guardian;
3. Notify the school nurse or appropriate administrator of student’s condition;
4. Move the student the shortest distance possible away from their triggers;
5. Administer quick-relief medication;
6. Monitor the student—Do not leave them alone for 30 minutes or until improved;
7. If not improved or worsening after 30 minutes, re-administer medication; and
8. If no improvement 30 minutes after re-administration of medication, call 911.

If a student presents with one or more symptoms in the danger zone
1. Call 911 immediately and administer quick-relief medication;
2. Call the student’s parent or guardian;
3. Notify the school nurse or appropriate administrator; and
4. Monitor the student—never leave him/her alone while waiting for 911 response.
VII. FOLLOW-UP

1. The school nurse will
   a. Write an incident report if the individual needed to be transported to a higher level of care.
   b. Debrief with Lab’s Emergency Management Team if applicable
   c. If an asthma flare up is mild and effectively managed with albuterol, the school nurse will follow their standard protocol to determine if the student should return to class.

2. After administration of albuterol, the school nurse will follow Illinois General Assembly’s reporting protocols.
   a. Within 24 hours after the administration of undesignated albuterol, if applicable, the lead nurse will notify the health care professional who provided the prescription for the albuterol of its use.
   b. Within 3 days after the administration of undesignated asthma medication by the school nurse at a school or school-sponsored activity, the lead nurse will report to the State Board of Education, on a form and in a manner prescribed by the State Board of Education, the following information:
      i. the age and type of person receiving the asthma medication (student, staff, or visitor);
      ii. any previously known diagnosis of asthma for the person; the trigger that precipitated respiratory distress, if identifiable;
      iii. the location of where the symptoms developed;
      iv. the number of doses administered;
      v. the type of person administering the asthma medication (school nurse, trained personnel, or student);
      vi. the outcome of the asthma medication administration; and
      vii. any other information required by the State Board.

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