

Regulation Code: 6125-R Administering Medications to Students

For purposes of this regulation, all references to “parent” include parents, legal guardians, and legal custodians. In addition, for purposes of this regulation, the term “health care practitioner” is limited to licensed medical professionals who are legally authorized to prescribe medications under North Carolina law, such as doctors of medicine, physician assistants and nurse practitioners

I. MEDICATION ADMINISTRATION BY SCHOOL EMPLOYEES

A. Medications, including topical, oral, inhaled, and nasal sprays, will be administered by school staff during the school day only when the medication authorization procedures are complete. A copy of this regulation will be kept at every site where medications are administered and will be provided to parents on request.

B. All medications must be in a pharmacy-labeled container with student name, or, for over-the-counter (OTC) medications, in the original container.

C. In order to ensure that medication is administered safely:

1. The principal, in collaboration with the school nurse will appoint one or more designee(s) to assist with medication administration. The school nurse may delegate medication administration under NC Nurse Practice Acts and will provide annual training and supervision for designated staff.

2. School Nurse Responsibilities:

- a. check medications and authorizations provided to the school for accuracy,
- b. keep a record of medication administration and/or monitor administration procedures of others who give medications,
- c. ensure that all medications are kept in a secure location,
- d. provide any necessary consultation concerning medication to appropriate school personnel,
- e. notify teachers when medication doses are missed if appropriate,
- f. develop a Health Action Plan for any student who requires medication for an emergency condition, with copies to be maintained by the school nurse, with medication authorization, and filed with the student’s health record, to be combined with cumulative folder at the end of each school year,
- g. return unused medication to the parent when discontinued or at end of school year
- i. contact prescribing health care practitioner for clarification of orders.

3. Parent Responsibilities:

a. provide medication authorization form signed by parent and health care practitioner that includes the following information:

- i.) student’s name

ii.) date of birth

iii.) name of medication

iv.) purpose of medication

v.) time to be administered

vi.) dosage

vii.) termination date for administering medication,

b. assume responsibility for supplying medication to the school,

c. notify school personnel of any change in the child's health or change in medication.

D. Changes in type or dose of medication require written authorization from both parent and health care practitioner.

E. Medication, when authorized by parent and health care practitioner but purchased with school funds, will be retained by the school.

F. In the event that medication administration requires special expertise, involves unusual risks, or a student or parent refuses to adhere to the medication policy, CHCCS reserves the right to decline to administer the medication.

G. CHCCS reserves the right to dispose of medication after the last day of school if despite notification; the parent does not collect the medication. Disposal of medication will be supervised by the school nurse and witnessed by the principal's designee.

H. A parent has the right to administer medication to his or her own child at any time while the student is on school property.

I. Medication procedures must be followed when student is on a field-trip or any school-sponsored activity within NC. See below for exception on out of state field-trip.

II. EXCEPTIONS TO MEDICATION ADMINISTRATION

A. Short-term prescription medication, such as antibiotics, for a period of time not to exceed two weeks

Authorization for administration of medication on a short-term basis of less than two weeks requires parent/guardian permission only, as long as the medication is in a pharmacy-labeled container, specifically identified for the student. The Medication Authorization form should be completed, with parent signature only.

B. Out of state Field Trips

School nurses cannot delegate medication administration to staff while in another state. While on field trip, staff will store medications in a secure place, and students will administer their own medication under supervision. The Medication Authorization form should be completed by the parent and health care practitioner, with the self-administration checked

C. Over-the-counter (OTC) medicines

A request for school staff to administer OTC medications must be provided in writing and signed by the parent and a health care practitioner. Students are discouraged from carrying non-prescription, OTC medicines, but it is not a violation of the substance abuse policy. Sharing of any medicine with other students, including OTC medicines, is prohibited.

Any student may self-medicate with his or her own medicine with the following:

- Sunscreen lotion
- Cough or throat lozenges, but not liquid cough medicine

In addition, high school students may self-medicate with the following non-prescription, OTC medicines:

- Pain relievers, such as ibuprofen, acetaminophen, Aleve, Midol, etc.
- Antacids

School nurses may dispense OTC cough or throat lozenges.

D. Student self-administering medications

The board recognizes that students with certain health conditions like diabetes or asthma or an allergy that could result in an anaphylactic reaction, may need to possess and self-administer medication on school property in accordance with their individualized health care plan or emergency health care plan.

1. A student with the above health concerns will be allowed to carry and self-administer medications when parent and health care practitioner assess, in collaboration with the school nurse, that (s)he is able to use them appropriately. However, a parent may elect to have these medications administered from the school office in accordance with other medication procedures.
2. A written diabetes/asthma/allergy plan must be completed
3. The student understands, has been instructed in self-administration of the medication, and has demonstrated the skill level necessary to use the medication and any accompanying device.
4. If a student is having significant difficulty with asthma requiring repeated use of short-acting bronchodilator, (s)he shall not continue to use the medication in place of getting appropriate medical care.
5. The Principal, in consultation with the School Nurse, is the final judge of the student's compliance with the self-administration regulations.
6. The only liability which the school can assume is to comply with the terms of this regulation. The school can assume no liability for monitoring self-administration, including frequency, dose, or failure to self-medicate when necessary.

E. Management of seizures

Diastat (rectal valium) is the medication of choice for prevention/treatment of refractory

seizures. Midazolam HCL (Versed) will not be administered to students during the school day for the following reasons:

- its use is experimental for children and is not approved by the United States Food and Drug Administration for use in children
- it must be specially prepared, resulting in variable dosing; it is not currently packaged, labeled, and dispensed in manner to assuredly prevent problems
- its use can't be delegated to unlicensed personnel

Physicians and parent/guardians will be notified when requests for school administration of Versed are submitted so that an alternative medication treatment plan can be established for the effected student.

In the event of status epilepticus or seizure clusters, school personnel will contact EMS for hospital transport and possible intravenous treatment of seizures.

III. STORAGE OF EMERGENCY MEDICATIONS

[North Carolina Administrative rule 15A NCAC 18A .2820](#)(d) requires all medications to be stored in a locked cabinet or container except for emergency medications where a delay of minutes could result in a serious negative outcome. The following emergency medications may be left unlocked so long as they are stored out of the reach of children:

- Diazepam (suppositories, Acudial)
- Epinephrine
- Glucagon
- Metered dose inhalers for management of asthma

IV. NON-EMERGENCY SPECIFIC MEDICATION ADMINISTRATION TO K-12 STUDENTS BY SCHOOL NURSE

School nurses are authorized to administer non-emergency medications listed on the Memorandum of Agreement between CHCCS and Orange County Health Department (OCHD) Medical Director. These include:

A. Non-prescription pain medication (Ibuprofen or Acetaminophen), consistent with the recommended dose for age as defined on package guidelines with prior permission from parent

1. Ibuprofen should never be given to persons with bleeding disorders, aspirin sensitivity, or to pregnant students.
2. The nurse will observe the following guidelines:
 - a. Student will describe type and history of pain
 - b. Check the student for fever, allergy history
 - c. Confirm parent permission to administer specific medication
 - i.) Check parent permission on SVIF/ Student Health Information form
 - ii.) Contact parent for verbal permission for middle and elementary

students

d. Complete documentation

3. Administration of non-prescription pain medication to students by the school nurse with permission from parent is at the discretion of the school nurse and the principal.

B. Triple Antibiotic Ointment for wound care

1. The nurse will observe the following guidelines:

- a. student is checked for medication allergies,
- b. the wound is thoroughly cleaned with soap and water prior to application.
- c. contact parent regarding wounds that do not appear to be healing or appear infected.

IV. EMERGENCY MEDICATION ADMINISTRATION TO STUDENTS AND/OR STAFF BY SCHOOL NURSE

School nurses are authorized to administer emergency medications listed on the Memorandum of Agreement (MOA) between CHCCS and Orange County Health Department (OCHD) Medical Director. These include:

A. Epinephrine and/or Benadryl for allergic response/anaphylaxis

- 1. oral diphenhydramine hydrochloride (Benadryl) and/or intramuscular epinephrine to any student or staff member who exhibits symptoms
- 2. The nurse will follow the OCHD Anaphylaxis protocol for the administration of epinephrine and diphenhydramine. OCHD will provide medical consultation as per the MOA
- 3. The child's parent must be notified immediately after administration.
- 4. Orange County Emergency Management Service or 911 must be called whenever epinephrine is given.

B. Activated Charcoal for ingestion of poison

- 1. In case of accidental ingestion of an edible substance, immediately contact the Carolina Poison Control Center in Charlotte, N.C (800-222-1222) to determine what treatment, if any, is required.
- 2. give Activated Charcoal when directed to do so by the Poison Control Center or other authorized medical personnel.
- 3. The child's parent must be notified immediately after administration of activated charcoal.

C. Albuterol for Asthma

- 1. The school nurse may administer short-acting, or relief, bronchodilator medication, such as albuterol, to students or staff with known history of asthma when they are

exhibiting significant symptoms of asthma and do not have access to their own inhaler.

2. Significant symptoms may include one or more of the following: frequent cough, wheezing, shortness of breath, trouble talking, walking or playing, chest retractions, use of accessory muscles for breathing, $SP02 < 94\%$

3. Parent will be included in decision-making process for medication administration. If parent cannot be contacted, School Nurse will notify the parent in writing.

4. Students who, at time of school dismissal, continue to exhibit symptoms of asthma will be kept at school until parent can pick them up.

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Chapel Hill-Carrboro Schools
