

Medication at School

Student Self-Carry / Self-Administration of Medication

A health professional or a student's parent or guardian may choose to have a student carry his/or her own non-narcotic medication and/or be permitted to self-administer the medication. The student's parent or guardian will 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. Except in the case of multi-dose devices (like asthma inhalers), students will 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.

Staff-Administered Medication

Each school principal will authorize two staff members to administer prescribed or non-prescribed oral medication. For purposes of this procedure, "medication" means oral medication, topical medication, eye drops, and nasal spray. This definition does not include over-the-counter topical sunscreen products regulated by the US Food and Drug Administration. Oral medications are administered by mouth either by swallowing or by 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 physician or registered nurse prior to the opening of school each year.

Prescribed or over-the-counter oral medication may be dispensed to students on a scheduled basis upon the receipt of a current, written, and unexpired request that the child be administered medicine by a designated staff member and a current, written, and unexpired request from a licensed health professional prescribing within the scope of their prescriptive authority. If the student requires medication for more than fifteen consecutive workdays, the district must also be in receipt of written, current, and unexpired instructions regarding administration of the medicine. Requests will be valid for not more than the current school year. The prescribed or non-prescribed medication must be properly labeled and be contained in the original container. The dispenser of oral medication will:

- A. Collect the medication directly from the parent (students should not transport medication to school), collect an authorization form properly signed by the parent and by the prescribing health professional and collect instructions from the prescribing health professional if the oral medication is to be administered for more than fifteen consecutive days;
- B. Store the prescription or non-prescribed oral medication (not more than a twenty (20) day supply) in a locked, substantially constructed cabinet, paying special attention to the safeguarding of legend (prescribed) drugs;
- C. Maintain a daily record which indicates that the oral medication was dispensed; and
- D. Provide for supervision by a physician or registered nurse.

A copy of this policy will be provided to the parent upon request for administration of medication in the schools.

Prescribed and over-the-counter oral or topical medications, eye drops or ear drops may be administered by a registered nurse, a licensed practical nurse or an authorized staff member.

“Nasal sprays containing legend (prescription) drugs or controlled substances may only be administered by a school nurse or, if a school nurse is not present on school premises, an authorized school employee, or a parent-designated adult with training as required by [RCW 28A.210.260](#). No prescribed medication will be administered by injection by staff except when a student is susceptible to a predetermined, life-endangering situation. In the event that a student is susceptible to a predetermined, life endangering situation requiring injection of medicine, refer to [Policy](#) and [Procedure 3420](#), Anaphylaxis Prevention and Response.

The parent will submit a written statement which grants a staff member the authority to act according to the specific written orders and supporting directions provided by licensed health professional prescribing within his or her prescriptive authority (e.g., medication administered to counteract a reaction to a bee sting). Such medication will be administered by staff trained by the supervising registered nurse to administer such an injection.

Written orders for emergency medication, signed and dated, from the licensed health professional prescribing within his or her prescriptive authority will:

- A. State that the student suffers from an allergy which may result in an anaphylactic reaction;
- B. Identify the drug, the mode of administration, the dose. Epinephrine administered by inhalation, rather than injection, may be a treatment option. This decision must be made by the licensed health professional prescribing within his or her prescriptive authority;
- C. Indicate when the injection will be administered based on anticipated symptoms or time lapse from exposure to the allergen;
- D. Recommend follow-up after administration, which may include care of the stinger, need for a tourniquet, administration of additional medications, transport to hospital; and
- E. Specify how to report to the health professional prescribing within his or her prescriptive authority and any record keeping recommendations.

Parent-Designated Adult Care of Students with Epilepsy

Parents of students with epilepsy may designate an adult to provide care for their student consistent with the student's individual health care plan. At parent request, school district employees may volunteer to be a parent-designated adult under this policy, but they will not be required to participate. Parent-designated adults who are school employees will file a voluntary, written, current and unexpired letter of intent stating their willingness to be a parent-designated adult. Parent-designated adults who are school employees are required to receive training in caring for students with epilepsy from the school nurse. Parent-designated adults will receive additional training from a parent-selected health care professional or expert in epileptic care to provide the care (including medication administration) requested by the parent.

Parent-designated adults who are not school employees are required to show evidence of comparable training and meet school district requirements for volunteers. Parent-designated adults will receive additional training from a parent-selected health care professional or expert in epileptic care to provide the care requested by the parent. The registered nurse is not responsible

for the supervision of procedures authorized by the parents and carried out by the parent-designated adult.

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Superintendent: Dr. Shelley K. Redinger