

Administrative Procedures for Possession/Use of Emergency Medications (Attachment for Policy No. 210.1)

Purpose

The Board of Education (“Board”) is committed to providing safe, welcoming, and healthy learning environments in all School District of Philadelphia (“District”) schools. The purpose of these Administrative Procedures is to provide guidance to District staff, parents/guardians, and students about the administration of emergency medications during school time.

Definitions

Asthma inhaler: A prescribed device used for self-administration of short-acting, metered doses of prescribed medication to treat an acute asthma attack.[1]

Emergency medications: Includes, but not be limited to asthma inhalers, epinephrine auto-injectors, prolonged seizure nasal spray and other medication prescribed to immediately treat or respond to a student’s acute medical condition in an emergency.

Epinephrine auto-injector: A single-use device used for the automatic injection of a premeasured dose of epinephrine into the human body (the thigh), used to treat life-threatening allergic reactions. Whenever epinephrine is given, 911 must be called. [2]

Self-administration: A student’s use of medication in accordance with a prescription or written instructions from a physician, certified registered nurse practitioner, or physician assistant.

Licensed prescribers: Licensed physicians (M.D. and D.O.), podiatrists, dentists, optometrists, certified registered nurse practitioners, and physician assistants.

Procedures

The possession/use of emergency medications shall be consistent with any accommodations outlined in a student’s Section 504 Service Agreement or Individualized Education Plan (IEP), in accordance with Board policy. [3][4]

Before a student may possess or use emergency medications in the school setting, they must provide the following: [5][6]

1. A written request from the parent/guardian that the school complies with the order of the licensed prescriber by completing the following form: [Request for Administration of](#)

Medicine (also known as the Med-1 form). [6]

2. An order from the licensed prescriber on the form linked in number 1, above. Please be sure to note the following: [6]
 - a. Potential serious reaction or side effects of medication.
 - b. Emergency response.
 - c. If the child is qualified and able to self-administer the medication.

The certified school nurse shall conduct a baseline assessment of the student's health status before creating a plan for self-administering prescribed emergency medication.

The student shall notify the school nurse immediately following each use of an asthma inhaler, epinephrine auto-injector, prolonged seizure nasal spray or other emergency medication. If the student is unable to notify the school nurse, a witnessing adult staff member should notify the nurse immediately about the use of the asthma inhaler, epinephrine auto-injector, or other emergency medication. If a school nurse is not available to respond to a medical emergency then the witnessing adult staff member should immediately call 911 and an adult staff member should remain with the student until 911 arrives. [6] The student's parent/guardian should also be contacted.

The certified school nurse shall provide periodic (at least 1-2 times a year) and ongoing assessments of the student's self-management skills during the time in which a plan for administering prescribed emergency medication exists.

Students shall be prohibited from sharing, giving, selling, and using an emergency medication in any manner other than which it is prescribed during school hours, at any time while on school property, at any school-sponsored activity, and during the time spent traveling to and from school or school-sponsored activities.

The District reserves the right to withdraw a student's authorization to self-administer and to make that decision in conformity with the Student Code of Conduct and other Board policies. [6]

For students who are not able and students who lose the privilege to carry and self-administer emergency medications, the District shall provide a safe, accessible storage location in the school building so that the prescribed medication is appropriately stored and inform the appropriate staff, including classroom teachers, of where the medication is located and the means to access the medication. [6]

An inventory of the medication, dosage used, and supply remaining shall be properly noted in the District's Student Information System (SIS) by the school nurse. The District reserves the right to

require a statement from the physician, certified registered nurse practitioner, or physician assistant for the continued use of a medication beyond the specified time period. Permission for possession and use of emergency medication by a student shall be effective for the school year for which it is granted and shall not be automatically renewed each subsequent school year, unless the District is provided a new written request. [6]

Student health records shall be confidential and maintained in accordance with state and federal laws and regulations. [7][8]

A student whose parent/guardian completes the written requirements for the student to possess emergency medication and self-administer the prescribed medication in the school setting shall demonstrate to the certified school nurse the competency for self-administration and responsible behavior in use of the medication. [6]

The District shall develop criteria to determine a student's competency to carry and self-administer emergency medications, which shall be based on the student's: [6]

1. Age.
2. Cognitive function.
3. Maturity.
4. Demonstration of responsible behavior.

Information about the possession and use of emergency medications shall be distributed with the Student Code of Conduct and made available on the [District website](#). [6][9]

Use of Emergency Medications Requiring Follow-Up in Hospital Emergency

The student shall notify the school nurse immediately following each occurrence of self-administration of medication. If the student is physically incapacitated, a witnessing adult staff member should notify the nurse immediately about the use of the asthma inhaler, epinephrine auto-injector, or other emergency medication. In the case of a child that has self-administered an emergency medication while in school and the nurse has been notified of the use of the medication, the student will require an immediate assessment by the school nurse in the following instances:

1. Self-administration of epinephrine auto-injector: In the event a student is believed to be having an anaphylactic reaction, the school nurse or an individual in the school who is responsible for the storage and use of epinephrine auto-injectors shall contact 911 as soon as possible. [6][10]
2. Repeated administration of rescue inhalers: If a child has reported self-use of the rescue

inhaler two or more times within a day, the school nurse must assess the child for need of hospital emergency follow-up. If the nurse assesses the student as in respiratory distress, the nurse shall immediately contact 911. If the nurse assesses the student as not in respiratory distress, the parent should be contacted and informed of their child's repeated usage of the medication while in school. [6]

3. Administration of nasal spray for prolonged seizure activity: Seizures lasting longer than five minutes, where students have been prescribed an emergency seizure medication by their physician in the form of a fast acting nasal spray, may be self administered or by school staff in the absence of a school nurse. 911 and the parents will be immediately contacted with each use.

Rectal administration of a medication for prolonged seizure activity is not included and must be administered by a nurse.

The school leader and/or nurse should notify the parent/guardian of the event. The event and parent/guardian communication should be documented in SIS. The school nurse should advise the parent/guardian to have the student follow up with their primary care physician. Follow-up with the child's primary medical provider should be strongly encouraged.

Managing Emergency Medications in Schools without a Nurse

Schools can not accept medications until a school nurse is assigned. Exceptions to the policy are emergency medications below. In order for these emergency medications to be accepted by the school and administered a student must have a completed [Request for Administration of Medicine](#) form on-file. The form must be signed by a physician.

Emergency Medications that can be accepted and administered by school staff:

- EpiPen (Epinephrine auto-injector)
- Asthma inhaler
- Prolonged seizure nasal spray

The school leader should notify the parent/guardian of the event. The event and parent/guardian communication should be documented in SIS.

Naloxone nasal spray is an emergency medication that can be administered by school staff, but does not require a completed Request for Administration of Medicine form. See [Naloxone Policy 823](#) for additional information.

School staff are not compelled to treat medical emergencies. In the case of a medical emergency all school staff should be instructed to call 911. Health and PE teachers are CPR and First Aid certified and may act as support when feasible.

The Office of Student Health Services provides support and training for schools without a school nurse. Schools without a nurse can request support and training about use/administration of emergency medications by emailing studenthealth@philasd.org.

Use of Undesignated Emergency Medications for Students with Known or Unknown Conditions

Training school employees to administer emergency medications to a student with known or unknown conditions, such as asthma or severe allergic reaction, is life saving and helps prevent emergencies. The following protocols allow trained employees to administer albuterol to any student experiencing an asthma episode or respiratory distress, or auto-injection epinephrine (EpiPen) to any student experiencing a severe allergic reaction also known as anaphylaxis.

- [Protocols for Use of Undesignated Albuterol Inhaler for Student with Known or Unknown Asthma and Respiratory Distress](#)
- [Protocols for Use of Undesignated Auto-Injection Epinephrine for Student with a Known or Unknown Risk for an Anaphylactic Reaction](#)

Maintenance Schedule

These Administrative Procedures will be reviewed upon review of the Policy, or upon the occurrence of a triggering event.

Legal References:

1. [24 P.S. §1401](#)
2. [35 Pa. C.S. §5502](#)
3. [Policy 103.1 - Nondiscrimination - Qualified Students with Disabilities/Protected Handicapped Students](#)
4. [Policy 113 - Special Education](#)
5. [22 Pa. Code §12.41](#)
6. [24 P.S. §1414.1](#)
7. [24 P.S. §1409](#)
8. [Policy 216 - Student Records](#)
9. [Policy 218 - Student Conduct and Discipline](#)
10. [24 P.S. §1414.2](#)

Related Information:

[Pennsylvania Department of Health Guidelines for Pennsylvania Schools for the Administration of Medications and Emergency Care, March 2010](#)