Delivery and Storage of Medications and Medical Technology

All medication and medical technology shall be brought to the nurse’s office, or the main office if the nurse is in another building, by the parent/guardian or by another adult designated by the parent/guardian. All medication shall be stored in the original pharmacy-labeled container and kept in a locked cabinet designated for storage of medication. The pharmacy label must contain the following information [1]:

- Name, address and telephone and federal DEA number of the pharmacy
- Patient’s name
- Name of medication and amount dispensed
- Directions for use of the medication
- Name and registration number of the licensed prescriber
- Prescription serial number
- Date originally filled
- Controlled substance statement, if applicable

Medications that require refrigeration shall be stored and locked in a refrigerator designated only for medications. The district shall not store more than a thirty-day supply of an individual student’s medication.

Medication and medical technology should be recorded and logged in with the date, name of student, name of medication, amount of medication, and signatures of the parent/guardian or designated adult delivering the medication and/or medical technology and the school health personnel receiving the medication and/or medical technology.

All medication and medical technology shall be accompanied by the appropriate district-approved form, or other written communication from the licensed prescriber.

Nonprescription medication must be delivered in its original packaging and labeled with the student’s name.

An inventory of the medication, dosage used and supply remaining shall be properly recorded in the district's student information system.

Student Self-Administration

In specific cases, individual students shall be allowed to be directly responsible for the maintenance and administration of their medication with minimal supervision. Prior to allowing a student to self-administer medication, the district shall require the following:
1. An order from the licensed prescriber for the medication, including a statement that it is necessary for the student to carry the medication and that the student is capable of self-administration.

2. Written parent/guardian consent.

3. An Individual Health Plan including an Emergency Care Plan.

4. A baseline assessment of the student's health status, conducted by the nurse.

In order to self-administer medication, the student must demonstrate the ability to:

1. Respond to and visually recognize his/her name.

2. Identify his/her medication.

3. Wash hands properly.

4. Measure, pour and administer the prescribed dosage of the medication.

5. Sign the medication sheet as acknowledgment of having taken the medication/treatment.


7. Notify the school nurse and parent/guardian when medication is gone.

The nurse shall provide periodic and ongoing assessments of the student's self-management skills.

The student shall notify the school nurse immediately following each occurrence of self-administration of medication.

Privileges for self-administration of medication will be revoked if school policies are abused ignored, or the student is otherwise not willing or able to follow the established policies and procedures.

**Disposal of Medications [1]**

1. Contaminated needles or other contaminated sharp materials should not be bent, recapped or removed. Contaminated needles should be placed immediately in a puncture resistant container that is labeled with a fluorescent or orange-red biohazard symbol or in a red container that is closable.
2. All discontinued or outdated medications should be returned to the parent/guardian immediately.
   a. Documentation of disposition should include the date, time, amount of medication, and signatures of the parent/guardian and school personnel.
   b. If the parent/guardian does not retrieve the medication at the end of the school year, the licensed personnel (CSN, RN, LPN) and one witness should dispose of the medication and document the disposal.

3. Medications should not be disposed down the drain. Instead, they should be disposed of in the trash. In order to discourage persons raiding the trash in search of the discarded medications, it is recommended to mix the medication with an undesirable substance prior to disposal.

**Administration of Medication/Medical Technology During Field Trips and Other School-Sponsored Activities**

Students on field trips are entitled to the same health services, including medication administration, to which they are entitled while attending school. Prior to allowing a student to attend a field trip, the district will require the following documentation:

1. Notification of school trips should occur at least 2 weeks, but no later than one week prior to the planned trip.

2. The prescribed medications should be clearly described and outlined in a plan of care for the entirety of the field trip. The description of the medication use should state the medication’s-
   a. Formulation
   b. Dosage
   c. Route of administration
   d. Frequency or time for taking the medication (i.e., “every 12 hours”; “take at 1 pm”)
   e. Medications should be provided to the district in an original container with the student’s name clearly labeled.

3. The plan of care should clearly state who will be responsible for the administration of the student’s medication while on the field trip. The possibilities for medication administration on a field trip, are as follows.
   a. Agency nurse--if notified with an appropriate amount of time, the district can often provide an agency nurse to accompany the student on the trip and to administer the medication.
   b. Parent--The school may ask a parent to accompany their student on a field trip to provide the necessary care, but it cannot require the parent to do so. When a parent is unable to accompany his or her child, the parent may designate, in writing, a responsible adult to accompany the child with the following restrictions.
      i. The parent must provide the supplies and training if the parent delegates treatments or medication administration to a responsible
adult. The school nurse may not participate in any way in the selection of a parent designee for the trip, nor in the training of the designee or in the provision of the supplies and medications.

ii. The parent may not choose a school staff member, school-designated trip chaperone or secondary student as a designee.

iii. The parent may not prescribe or alter treatments or medication administration orders for the school nurse or other licensed professional unless the parent is a Pennsylvania licensed provider.

c. Licensed volunteer--the district may choose a licensed volunteer to administer the student’s medication. The licensed volunteer’s assigned duties must be within their professional scope of practice. The volunteer’s license must be active and in good standing. The licensed volunteer should be provided with the student’s plan of care and order for the medication. Additionally, the licensed volunteer should have the necessary training to perform the treatment the student requires, utilizing the equipment/medication that the student routinely uses to receive the treatment.

d. Student--the only medications a student may self-carry and self-administer are an asthma rescue inhaler, insulin, and an epinephrine auto-injector. Students that are allowed to self-carry should already have a self care plan on file with signed statements by parent and health care provider, allowing for the self-carry/self administration. Prior to the trip the school nurse should perform an assessment of the student’s ability to self-administer the medication.

4. Out-of-state field trips--the school must ensure that the nurse and/or licensed volunteer is permitted to practice in the state under their Pennsylvania license.

5. Out-of-country field trips--the school must contact that country’s consulate to ensure the nurse and/or licensed volunteer is permitted to practice in the country under their Pennsylvania license.

6. Other considerations
   a. The school should verify that each volunteer has had child abuse clearance
   b. Volunteers expected to have more than 10 hours a week in direct contact with students will require a TB test.

References

1. Pennsylvania State Department of Health-Division of School Health
   www.health.pa.gov “Guidelines for PA Schools for the Administration of Medication and Emergency Care”

2. Pennsylvania State Department of Health-Division of School Health
   www.health.pa.gov “School Nurse Practice Issues”