

Administering Noninjectable and Injectable Medicines to Students **

Students may, subject to the provisions of this regulation, have prescription or nonprescription medication administered by designated, trained school staff. Self-medication by students also will be permitted in accordance with this regulation and state law.

1. Definitions

- a. “Prescription medication” means any noninjectable drug, chemical compound, suspension or preparation in suitable form for use as a curative or remedial substance taken either internally or externally by a student under the written direction of a physician. Prescription medication includes any prescription for bronchodilators or autoinjectable epinephrine prescribed by a student’s Oregon licensed health care professional for asthma or severe allergies. Prescription medication does not include dietary food supplements. As per Oregon Administrative Rule (OAR) 851-047-0030 through 851-047-0040, a registered nurse may administer a subcutaneous injectable medication.
- b. “Nonprescription medication” means only commercially prepared, nonalcohol-based medication to be taken at school that is necessary for the student to remain in school. This shall be limited to medication for eyes, nasal spray, cough drops, cough suppressants, analgesics, decongestants, antihistamines, topical antibiotics, anti-inflammatories, and antacids that do not require written or oral instructions from a physician. Nonprescription medication does not include dietary food supplements.
- c. “Physician”¹ means a doctor of medicine or osteopathy, a physician assistant licensed to practice by the Board of Medical Examiners for the state of Oregon, a nurse practitioner with prescriptive authority licensed by the Oregon State Board of Nursing, a dentist licensed by the Board of Dentistry for the state of Oregon, an optometrist licensed by the Board of Optometry for the state of Oregon, or a naturopathic physician licensed by the Board of Naturopathy for the state of Oregon.
- d. “Student self-medication” means a student must be able to administer medication to himself or herself without requiring a trained staff member to assist in the administration of the medication.
- e. “Age-appropriate guidelines” means the student must be able to demonstrate the ability, developmentally and behaviorally, to self-medicate with permission from parent or guardian, building administrator, and in the case of a prescription medication, a physician.
- f. “Training” means yearly instruction, by a qualified trainer, provided to designated staff on the administration of prescription and nonprescription medication, based on requirements set out in guidelines approved by the Oregon Department of Education, including discussion of applicable district policies, procedures, and materials.

¹Added to Oregon Revised Statute 678.010 to -678.410: A registered nurse who is employed by a public or private school may accept an order from a physician licensed to practice medicine or osteopathy in another state or territory of the U.S. if the order is related to the care or treatment of a student who has been enrolled at the school for not more than 90 days (House Bill 3149 (2015)). This is to allow time for new students to find an Oregon licensed physician.

- g. “Qualified trainer” means a person who is familiar with the delivery of health services in a school setting and who is a registered nurse licensed by the Oregon State Board of Nursing, a physician, or a pharmacist licensed by the State Board of Pharmacy for the state of Oregon.
- h. “Severe allergy” means a life-threatening hypersensitivity to a specific substance such as food, pollen, or dust.
- i. “Asthma” means a chronic inflammatory disorder of the airways that requires ongoing medical intervention.
- j. “Designated staff” means the staff person who is designated by the building administrator to administer prescription or nonprescription medication.

2. Designated Staff/Training

- a. The building administrator will designate trained staff authorized to administer prescription or nonprescription medication to students while the student is in school, at a school-sponsored activity, under the supervision of school personnel, in before- or after-school care programs on school-owned property, and in transit to or from school or school-sponsored activities. The building administrator will supervise and ensure building and activity practices and procedures are consistent with the requirements of law, rules, and this regulation.
- b. The building administrator will ensure the training required by law and Oregon Administrative Rules is provided. Training must be conducted by a qualified trainer.
- c. Training will provide an overview of applicable provisions of Oregon law, administrative rules, district policy, and administrative regulations and include, but not be limited to the following: safe storage, handling, monitoring medication supplies, disposing of medications, record keeping, reporting of medication administration and errors in administration, emergency medical response for life threatening side effects, allergic reactions, and student confidentiality. Materials as recommended and/or approved by the Oregon Department of Education will be used.
- d. Training will be provided yearly to designated staff authorized to administer medication to students.
- e. A copy of the district’s policy and administrative regulation will be provided to all staff authorized to administer medication to students and others as appropriate.
- f. A statement that the designated staff member has received the required training, will be signed by the staff member and filed in the district office.

3. Administering Premeasured Doses of Epinephrine to a Student or Other Individual

A premeasured dose of epinephrine may be administered by trained, designated district staff to any student or other individual on school premises who the personnel believes, in good faith, is experiencing a severe allergic reaction, regardless of whether the student or individual has a prescription for epinephrine.

4. Administering Medications to Students

- a. A request for designated staff to administer medication to a student may be approved by the district subject to the following:
 - (1) A written request for the district designated staff to administer prescription medication to a student, if because of the prescribed frequency for the medication, the medication must be given while the student is in school, at a school-sponsored activity, while under the supervision of school personnel, in before- or after-school care programs on

school-owned property, and in transit to or from school or school-sponsored activities, must be submitted to the school office and shall include:

- (a) The written signed permission of the parent or guardian;
- (b) The written instruction from the physician, physician assistant, or nurse practitioner for the administration of the prescription medication to the student including:
 - (i) Name of the student;
 - (ii) Name of the medication;
 - (iii) Method of administration;
 - (iv) Dsage;
 - (v) Frequency of administration; and
 - (vi) Other special instruction, if any.

The prescription label will be considered to meet this requirement if it contains the information listed in (i)-(vi) above.

- (2) A written request for the district to administer nonprescription medication must be submitted to the school office and shall include:
 - (a) The written signed permission of the parent or guardian;
 - (b) The written instruction from the parent or guardian for the administration of the nonprescription medication to the student including:
 - (i) Name of the student;
 - (ii) Name of the medication;
 - (iii) Method of administration;
 - (iv) Dosage;
 - (v) Frequency of administration;
 - (vi) Other special instruction, if any.
- b. Medication is to be submitted in its original container;
- c. Medication is to be brought to and returned from the school by the parent;
- d. It is the parent's responsibility to ensure that an adequate amount of medication is on hand at the school for the duration of the student's need to take medication;
- e. It is the parent's responsibility to ensure that the school is informed in writing of any changes in medication instructions;
- f. In the event a student refuses medication, the parent will be notified immediately. No attempt will be made to administer medication to a student who refuses district administered medication;
- g. Any error in administration of medication will be reported to the parent immediately and documentation made on the district's Accident/Incident Report form. Errors include, but are not limited to administering medication to the wrong student, administering the wrong medication, dose, frequency of administration, and method of administration;
- h. Medication shall not be administered or self-medication allowed until the necessary permission form and written instructions have been submitted as required by the district.

5. Student Self-Medication of a Prescription or Nonprescription Medication

- a. Student self-medication of prescription and nonprescription medication by K-12 students, including students with asthma or severe allergies, will be allowed subject to the following:
 - (1) Grades K-8: Self medication of prescription and nonprescription medication only is allowed when a student must carry such medication on his/her person for immediate access.
 - (2) A parent or guardian permission form and other documentation requested by the district must be submitted for self-medication of all prescription and nonprescription medications.
 - (3) A prescription written by an Oregon licensed health care professional that includes a written treatment plan for managing of student's asthma, diabetes, and/or severe allergy, and for use by the student while the student is in school, at a school-sponsored activity, while under the supervision of school personnel, in before- or after-school care programs on school-owned property, and in transit to or from school or school sponsored activities, and acknowledgment the student has been instructed in the correct and responsible use of the medication.
 - (4) Building administrator permission is required for all self-medication requests. District registered nurse permission is required for self-medication of all medications in grades K-8. For grades 9-12, the district registered nurse is available for consultation with the building administrator and/or parent or guardian as needed.
- b. Students who are developmentally and/or behaviorally unable to self-medicate will be provided assistance by designated staff. A permission form and written instructions will be required as provided in Section 4.a. above;
- c. All prescription and nonprescription medication must be kept in its appropriately labeled, original container, as follows:
 - (1) Prescription labels must specify the name of the student, name of the medication, dosage, method of administration, and frequency or time of administration, and any other special instruction including physician authorization for student to self-medicate;
 - (2) Nonprescription medication must have the student's name affixed to the original container.
- d. The student may have in his/her possession only the amount of medication needed for that school day, except for manufacture's packaging that contains multiple dosages. The student may carry one package, such as but not limited to, autoinjectable epinephrine or bronchodilators/inhalers.
- e. Sharing and/or borrowing of any medication with another student is strictly prohibited.
- f. Students needing to self-medicate must carry their medication with them for immediate access; e.g., in a personal bag/purse, backpack, pocket. Medication should not be left on desks, countertops, or other places where others would have access.
- g. Students will not dispose of medication, containers, syringes, and/or lancets at school. Disposal will be done at home as appropriate.
- h. For students who have been prescribed bronchodilators or epinephrine, staff will request that the parent or guardian provide backup medication for emergency use by that student. Backup medication (when provided by the parent or guardian) will be kept at the student's school in a location to which the student has immediate access in the event the student has an asthma and/or severe allergy emergency.

- i. Upon written parent request and with a physician's written statement that the lack of immediate access to a backup autoinjectable epinephrine may be life threatening to a student and the location the school stores backup medication is not located in the student's classroom, a process shall be established to allow the backup autoinjectable epinephrine to be kept in a reasonably secure location in the student's classroom.
- j. Permission to self-medicate may be revoked if the student violates the Board policy and/or these regulations. Additionally, students may be subject to discipline, up to and including expulsion, as appropriate.
- k. The school is not responsible for maintaining a medication log when the student is self-medicating.

6. Handling, Storing, Monitoring Medication Supplies

- a. Medication administered by designated staff or self-administered by the student must be delivered by the parent to the school, in its original container, accompanied by the permission form and written instructions, as required above.
- b. Medication in capsule or tablet form and categorized as a sedative, stimulant, anti-convulsant, narcotic analgesic, or psychotropic medication will be counted by designated staff in the presence of another district employee upon receipt, documented in the student's medication log, and routinely monitored during storage and administration. Discrepancies will be reported to the building administrator immediately and documented in the student's medication log. For such medication not in capsule or tablet form, standard measuring and monitoring procedures will apply.
- c. Designated staff will follow the written instructions of the physician and parent and training guidelines as may be recommended by the Oregon Department of Education for administering all forms of prescription and/or nonprescription medications.
- d. Medication will be secured as follows:
 - (1) Nonrefrigerated medications will be stored in a locked cabinet, drawer, or box;
 - (2) Medications requiring refrigeration will be stored in a locked box in a refrigerator or in a separate refrigerator used solely for the storage of medication;
 - (3) Access to medication storage keys will be limited to the building administrator and designated staff.
- e. Designated staff will be responsible for monitoring all medication supplies and for ensuring medications are secure at all times, not left unattended after administering, and that the medication container is properly sealed and returned to storage.
- f. In the event medication is running low or an inadequate dosage is on hand to administer the medication, the designated staff will notify the parent immediately.

7. Emergency Response

- a. Designated staff will notify 911 or other appropriate emergency medical response systems and administer first aid as necessary in the event of life threatening side effects that result from district administered medication or from student self-medication or allergic reactions. The parent, district nurse, and building administrator will be notified immediately.
- b. Minor adverse reactions that result from district administered medication or from student self-medication will be reported to the parent immediately.

8. Disposal of Medications

- a. Medication not picked up by the parent at the end of the school year, or within five school days of the end of the medication period, whichever is earlier, will be disposed of by designated staff in a nonrecoverable fashion as follows:
 - (1) The Department of Public Safety provides secure drop boxes for the disposal of medications, with one being located on the Oregon State University campus. Schools may use that location to dispose of unused or expired medication in their original containers, as well as inhalers.
 - (2) Other medication will be disposed of in accordance with established training procedures including sharps and glass.
- b. All medication will be disposed of by designated staff in the presence of another employee and documented as described in 9.a. below.

9. Documentation and Record Keeping

- a. A medication log will be maintained for each student administered medication by the district. The medication log will include but not be limited to:
 - (1) The name, dose, and method of medication administered and the date, time of administration, and name of the person administering the medication;
 - (2) Student refusals of medication;
 - (3) Errors in administration of medication²;
 - (4) Emergency and minor adverse reaction incidents²;
 - (5) Discrepancies in medication supply;
 - (6) Disposal of medication including date, quantity, manner in which the medication was destroyed and the signature of the staff involved.
- b. All records relating to administration of medicines, including permission slips and written instructions, will be maintained in a separate, medical file apart from the student's education records file unless otherwise related to the student's educational placement and/or individualized education plan. Records will be retained in accordance with applicable provisions of OAR 166-414-0010 (17) and OAR 166-400-0060(29).
- c. Student medical files will be kept confidential. Access shall be limited to those designated staff authorized to administer medication to students, the student, and his/her parents. Information may be shared with staff with a legitimate educational and safety interest in the student or others as may be authorized by the parent in writing.

A school administrator, teacher, or other district employee designated by the school administrator is not liable in a criminal action or for civil damages as a result of the administration of prescription and/or nonprescription medication as per state law.

A school administrator, district nurse, teacher, or other district employee designated by the school administrator is not liable in a criminal action or for civil damages as a result of a student's

²Designated staff may note incident by symbol in medication log and attach detailed documentation as necessary.

self-administration of medication, when that person in good faith assisted the student in self-administration of the medication, as per state law.

A school administrator, district nurse, teacher or other district employee is not liable in a criminal action or for civil damages, when in good faith administers autoinjectable epinephrine to a student or other individual with a severe allergy, who is unable to self administer the medication, as per state law.

A school district and the members of a school district board are not liable in a criminal action or for civil damages when a student or individual is unable to self-administer medication, when any person in good faith administers autoinjectable epinephrine to a student or individual, as per state law.