



# EOLA of OHIO

## TEMPLATES

**OFFICE OF THE SUPERINTENDENT**  
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**REVISED GUIDELINE - VOL. 36, NO. 1**

**USE OF MEDICATIONS**

The medications and/or treatments which may be administered are defined in Policy 5330 and Policy 5336. In those circumstances where a student must take prescribed medication during the school day, with the exception of diabetes care covered under Policy 5336, the following guidelines are to be observed:

- ( ) Parents should cooperatively determine with the counsel of their child's prescriber whether the medication schedule can be adjusted to avoid administering medication during school hours.

Before the student will be permitted to take medication during school hours, use an inhaler to self-administer asthma medication, or use an epinephrine autoinjector (epi-pen), Form 5330 F1, Authorization for Prescribed Medication/Drug or Treatment, or Form 5330 F3, Authorization for the Possession and Use of Asthma Inhaler/Other Emergency Medication(s), or Form 5330 F4, Authorization for the Possession and Use of Epinephrine Autoinjector (epi-pen) must be filed annually and as necessary for any change in medication order with the \_\_\_\_\_ and, to the School Nurse if one is assigned to the student's building.

1. Form 5330 F1, Authorization for Prescribed Medication/Drug or Treatment, shall include the following:
  - a. student's name and address;
  - b. name of the medication/drug and dosage to be administered and/or procedure required to be followed;
  - c. the time or intervals at which each dosage of the medication/drug is to be administered;





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- d. any severe adverse reactions that should be reported to the physician and one or more telephone numbers at which the prescriber can be reached in an emergency; a signed parental release that allows direct contact with the prescriber in such emergency reaction situations will not supersede nor abrogate the "Emergency Medical Form";
- e. special instructions for administration of the medication/drug, including sterile conditions and storage;
- f. the date administration of the prescribed medication/drug is to begin;
- g. the date administration of the prescribed medication/drug is to cease;
- h. authorization for school personnel to administer the prescribed medication;
- i. agreement/satisfactory arrangement to deliver the medication/drug to/from school (i.e., the medication/drug must be received by the person authorized to administer it to the student for whom it is prescribed in the container in which it was dispensed by the prescriber or a licensed pharmacist);
- j. agreement to re-submit Form 5330 F1, Authorization for Prescribed Medication/Drug or Treatment, if the medication, dosage, schedule, procedure or any other information contained on the licensed prescriber's statement is changed or eliminated;
- k. the prescriber's name, address, and telephone number;
- ( ) probable side affects;





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- ( ) a student to self-administer the medication but only in the presence of an authorized staff member or parent.
- 2. Form 5330 F3, Authorization for the Possession and Use of Asthma Inhaler/Other Emergency Medication(s), shall include the following:
  - a. the student's name and address;
  - b. the names and dose of the medication contained in the inhaler;
  - c. the date the administration of the medication is to begin;
  - d. the date, if known, that the administration of the medication is to cease;
  - e. written instructions that outline procedures school personnel should follow in the event that the asthma medication does not produce the expected relief from the student's asthma attack;
  - f. any severe adverse reactions that may occur to the child using the inhaler and that should be reported to the prescriber;
  - g. any severe adverse reactions that may occur to another child for whom the inhaler is not prescribed, should such a child receive a dose of the medication;
  - h. at least one (1) emergency telephone number at which the prescriber may be contacted in an emergency;
  - i. at least one (1) emergency telephone number for contacting the parent, guardian, or other person having care or charge of the student in an emergency; and





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- j. any other special instructions from the prescriber.
- 3. Form 5330 F4, Authorization for the Possession and Use of Epinephrine Autoinjector (Epi-Pen), shall include the following:
  - a. student's name and address
  - b. name of the medication/drug contained in the autoinjector and dosage to be administered
  - c. the date administration of the prescribed medication/drug is to begin
  - d. the date administration of the prescribed medication/drug is to cease (if known)
  - e. acknowledgement that the prescriber has determined that the student is capable of possessing and using the autoinjector appropriately and has provided the student with training in the proper use of the autoinjector
  - f. circumstances in which the autoinjector should be used
  - g. written instructions that outline procedures school personnel should follow in the event that the student is unable to administer the anaphylaxis medication
  - h. written instructions that outline procedures school personnel should follow in the event that the anaphylaxis medication does not produce the expected relief from the student's anaphylaxis





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- i. any severe adverse reactions that may occur to the child using the autoinjector that should be reported to the prescriber
  - j. any severe adverse reactions that may occur to another child, for whom the autoinjector is not prescribed, should receive a dose of the medication
  - k. at least one (1) emergency telephone number at which the prescriber may be contacted in an emergency
  - l. at least one (1) emergency telephone number for contacting the parent, guardian or other person having care or charge of the student in an emergency
  - m. any other special instructions from the prescriber
4. A student may possess and use a metered dose inhaler or a dry powder inhaler either before exercise to prevent the onset of asthmatic symptoms or to treat the symptoms once they occur at school, or at any activity, event, or program sponsored by the student's school or in which the school participates. Additionally, a student may possess and use an epinephrine autoinjector to treat anaphylaxis once it occurs at school, or at any activity, event, or program sponsored by the student's school or in which the school participates. The Principal or school nurse, if one is assigned to the student's building shall also be provided with a backup dose of the anaphylaxis medication by the parent/guardian, or student (if s/he is eighteen (18) or older).
5. Students authorized to possess and use a metered dose or dry powder inhaler or an epinephrine autoinjector under the Board policy may not transfer possession of any inhaler, epinephrine autoinjector or other medication to any student or permit any other student to use the inhaler medication or anaphylaxis medication.





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6. School personnel are not authorized to assist a student in self-administering asthma medication or anaphylaxis medication unless the policy and procedures regulating administration of medication by school personnel have been met. In the event the epinephrine is administered by the student or school personnel at school, or at any activity, event, or program sponsored by the student's school or in which the school participates, a school employee shall immediately request assistance from an emergency medical provider (i.e., 911).
  7. Annually, the \_\_\_\_\_ shall contact the parent(s) of any student whose school records indicate that s/he has asthma and advise them of the option to have said student carry and self-administer approved inhalers in school. A copy of Form 5330 F3, Authorization for the Possession and Use of Asthma Inhaler/Other Emergency Medication(s), is to be enclosed with this communication.
  8. Additionally, the \_\_\_\_\_ shall contact the parent(s)/guardian(s) of any student whose records indicate that s/he has anaphylaxis and advise them of the option to have the student carry and self-administer an epinephrine autoinjector to treat the anaphylaxis. A copy of Form 5330 F4, Authorization for the Possession and Use of Epinephrine Autoinjector (Epi-pen), is to be enclosed with such communication.
- ( ) Upon receipt, a copy of Form 5330 F1, Authorization for Prescribed Medication/Drug or Treatment, a copy of Form 5330 F3, Authorization for the Possession and Use of Asthma Inhaler/Other Emergency Medication(s), and/or a copy of Form 5330 F4, Authorization for the Possession and Use of Epinephrine Autoinjector (Epi-pen), shall be filed in the student's permanent record as well as in the binder with the student medication log sheet.





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- ( ) All medications to be administered during school hours must be registered with the \_\_\_\_\_'s office and will be secured in \_\_\_\_\_. Upon receipt of the medication, the \_\_\_\_\_ shall verify the amount of medication brought to the school and indicate that amount on the student medication log sheet.
- ( ) Medication that is brought to the office will be properly secured. Medication may be conveyed to school directly by the parent/guardian or other responsible adult at parental request. This should be arranged in advance. Two to four (2-4) weeks supply of medication is recommended. Medication MAY NOT be sent to school in the student's lunch box, pocket, or other means on or about his/her person. An exception to this would be prescriptions for emergency medications for allergies and/or reactions, including an epinephrine autoinjector to treat anaphylaxis, or asthma inhalers.
- ( ) For each prescribed medication, the container shall have a pharmacist's label with the following information:
  - 1. student's name;
  - 2. prescriber's name;
  - 3. date issued and expiration date;
  - 4. pharmacy name and telephone;
  - 5. name of medication;
  - 6. prescribed dosage and frequency;
  - 7. special handling and storage directions.
- ( ) Any unused medication unclaimed by the parent will be destroyed by administrative personnel when a prescription is no longer to be administered or at the end of a school year.





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- ( ) The staff member administering the medication shall make reasonable efforts to assist the student in taking the medication properly.
- ( ) If a student does not take the medication at the proper time, the staff member responsible for administering the medication shall attempt to locate the student and administer the medication and to then notify the parents of the importance of the child reporting on time for his/her medication.
- ( ) All medications are to be administered in such a way as to not unduly embarrass the student.
- ( ) A log for each prescribed medication shall be maintained that records the personnel giving the medication, the date, and the time of day. This log will be maintained along with the prescriber's written request and the parent's written release. (see Form 5330 F2)
- ( ) Form 5330 F1, Authorization for Prescribed Medication/Drug or Treatment, shall be completed and signed by the \_\_\_\_\_ authorizing the person(s) who may administer the medication or procedure.
- ( ) A count of each student's medication is to be made every \_\_\_\_\_ and the amount reconciled with the original amount indicated on the log sheet and the number administered since the last count.
- ( ) If, for supportable reasons, the \_\_\_\_\_ wishes to discontinue the privilege of a student self-administering a medication, except for the possession and use of asthma inhalers or epinephrine autoinjector, s/he shall notify the parent/guardian of this decision in sufficient time for an alternative administration to be established.
- ( ) Only employees who are licensed health professionals or who have completed the specified drug administration training program conducted by a licensed health professional and are designated by the Board may administer a prescribed medication to a student.





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- ( ) Written documentation of the training provided for each person authorized to administer a prescribed medication or treatment will show:
  - ( ) what training was given;
  - ( ) the trainer's name and professional status;
  - ( ) when the training was given;
  - ( ) the duration of the training.

( ) **Nonprescribed (Over-the-Counter) Medications**

A student may be allowed to possess and self-administer an over-the-counter medication upon the written authorization of the parent. The parent must complete Form 5330 F1a or Form 5330F1b - Authorization for Nonprescribed Medication or Treatment and submit it to the school office for filing in the student's records.

If a student is found with a medication in his/her possession, his/her record should be checked to determine if the proper authorization is on file. If not, the matter is to be reported to the \_\_\_\_\_ for disciplinary action. The \_\_\_\_\_ may use one or more of the following procedures, depending on the particular situation:

- ( ) Contact the parent and arrange for the parent to submit Form 5330 F1a or Form 5330 F1b, Authorization for Nonprescribed Medication or Treatment, as soon as possible.
- ( ) Take the medication from the student and keep it in the school office until the completed form has been submitted.





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- ( ) Place the student in In-School Restriction for no more than \_\_\_\_ days for failure to abide by school rules.
- ( ) Suspend the student from school for no more than \_\_\_\_ days.

The purpose of any disciplinary action on this matter should be to make it clear to all students and parents that, because of its policy on drug use, the school cannot allow possession or use of any form of unauthorized drug or medication at any time.

- ( ) Dispensing of nonauthorized, over-the-counter (OTC) medication by Board employees to students served by the District is prohibited. Where investigation confirms such allegations, prompt corrective action shall be taken up to and including dismissal.

 **Students shall be permitted to possess and self-administer over-the-counter topical sunscreen products while on school property or at a school-sponsored event**

-  ( ) **provided the student has submitted prior written approval of his/her parent/guardian to the Principal. (See Form 5330 F1a or Form 5330 F1b.)**

Nothing in this administrative guideline shall limit the use of an epinephrine autoinjector in emergency situations as provided in Policy 5330.02 and AG 5330.02.