

Holland Independent School District Department of Health Services

Guidelines for the Administration of Medication during the School Day

Parents/guardians and physicians are encouraged to schedule all necessary student medications to be administered during **non-school hours**. If a student must take medication during the school day, medications will be administered in the nurse's office according to District guidelines.

To accomplish this purpose within the recommendations of **Section 21.914 of the Texas Education Administrative Code**, the following guidelines are established.

MEDICATION ADMINISTRATION WHILE AT SCHOOL

- 1. All medication(s) to be administered during the school day must have orders written by a qualified <u>health care provider licensed in the state of Texas.</u> A form from the student's health care provider requesting administration of medication by school personnel must be on file in the nurse's office with the nurse's documentation of time orders and medication are received. This form must include a written and signed request by the parent/guardian indicating permission for the District to administer the requested medication. Forms are available in the nurse's office and on the Holland ISD Health Clinic web page. These forms will be kept in a confidential secure location in the nurse's office and ultimately filed in the student's Health Folder. All health records will be stored as per the District's records retention policy.
- Both prescription and/or non-prescription (over the counter) medication(s) must have a signed written request from a licensed health care provider and the parent/ guardian/person having legal authority of the student in order to be administered during the school day or school related activity.
- 3. Treatments such as essential oils or herbal supplements are not FDA Drug Approved and will not be administered at school.
- 4. All medication given during the school day or school related activity will be administered *exactly* as written on the **Physician's Request for Administration of Medication by School Personnel** form.
- 5. The written request form must be dated for the current school year and expires at the end of the current school year. **A new completed form is required if there is a change** in the way or how the medication is to be administered (i.e. dose, time, medication).
- 6. In the absence of the school nurse, the campus administrator should designate a responsible District campus employee to supervise the storing, dispensing and documentation of medications administered. This person(s) will be trained in the medication administration process by the school nurse.
- 7. Medication must be kept in a locked storage unit that is *not* easily accessible.

- 8. Medication must be brought directly to the school nurse or other authorized school personnel by the parent or guardian. Students are not allowed to transport medication to and from school.
- 9. All medication must be in the original container and be labeled with the student's name, name of licensed prescribing healthcare provider, date ordered, name of medication, dosage instructions, pharmacy contact information and expiration date. Medication will be administered at the correct time as reflected in the written orders. A "30 minute window" for administration before and after the official ordered time will be in effect. Prescription medications dispensed directly from a physician's office must be properly labeled and be accompanied by orders from a health care provider. Non-prescription (over the counter) medications must be brought to school in the original container and be accompanied by orders from the licensed health care provider.
- 10. Parent/guardian should provide written permission for the school nurse to contact the prescribing health care provider regarding any questions in relation to medication(s) to be administered during the school day or school related activity.
- 11. All medication orders must be reviewed at the beginning of each school year. A *current* written request from the licensed health care provider and parent/guardian signed consent to administer medication must be on file prior to administering the medication.
- 12. Students may carry Epi-pens, insulin and/or inhalers with written consent from the licensed health care provider and parent/guardian as per district policy. The student must be able to safely and effectively be able to administer medications approved for self-administration. Determination will be made by input from the licensed health care provider, parent and school nurse.
- 13. At the end of the school year, all medication must be picked up by the parent/guardian in the nurse's office no later than the last day of school. Any medication left in the nurse's office will be destroyed.
- 14. Medication administered by injection may be given at school as indicated by written orders from the licensed health care provider and signed parent/guardian consent form. The parent/guardian is responsible to provide the school with a signed written request for administration of an injectable medication. Appropriate Injectable medication includes medication needed in a life threatening situation (i.e.: Epi-pen, diabetic insulin injections, glucagon and seizure medications). Parents will provide all medication and supplies necessary for the administration of injectable medication. Used needles and syringes are to be discarded in labeled appropriate puncture proof "Hazardous Material" containers.
- 15. Prior arrangements should be made with the campus administrator and/or school nurse for students who may need medication to be administered during a <u>field trip or off-campus</u> <u>school sponsored activities</u>. This may include scheduled medication and/or rescue medication. The nurse will prepare the medication for the field trip in a storage container that contains the student's name and dose of the medication, directions to administer the medication, and the time the medication is to be administered. After administration, the teacher or designee must report the process to the school nurse for documentation. Notification of field trip attendance must be made to the nurse 5 days prior to the field trip to allow for safe and proper preparation
- *16.* Employees of Holland Independent School District **will not** administer prescription or nonprescription medication to students without the proper documentation as per district guidelines.
- 17. Any patterns of non-compliance by the student regarding medication administration will be reported to the parent/guardian.

18. ALL diabetic orders will be double checked by a HISD Registered Nurse once the orders are received.

CONTROLLED SUBSTANCES:

Drugs and other substances that are considered "controlled substances" under the Controlled Substances Act (CSA) are divided into 5 groups based on risk of abuse or harm. Some of these substances include Ritalin, Adderall, and Codeine.

- 1. Medications that fall under the *"controlled substance"* group and are allowed to be administered in the school setting will be closely monitored. Controlled medication will be counted at the time the school nurse or other designated school personnel receives the medication. The count should be witnessed by another adult and documented with both individual's names and signatures.
- Documentation of medication(s) received will be made on the appropriate Medication Count Documentation Log. The number /amount of pills, capsules or ounces will be entered into the documentation log and will include the date and time the medication was received. The Medication Count Documentation Log will be signed and/or initialed by person(s) receiving the medication.
- 3. The school nurse will monitor controlled substances by conducting random counts.
- 4. All keys to the locked medication cabinets where controlled medication is stored will be provided to the school nurse and campus administrator.
- 5. Controlled medications will be stored in a locked cabinet **at all times**.
- 6. Controlled medication that needs to be wasted/destroyed or returned to parent/guardian will be noted on the medication log, witnessed and documented.
- 7. Discrepancies in the count of a controlled substance will be reported to the campus administrator and the school nurse. The parent will also be notified of the discrepancy and a **Medication Incident Report** will be completed.
- 8. All controlled medication must be brought to the school by the parent/guardian and given to the school nurse or appropriate school personnel. <u>Students are not allowed to</u> <u>carry/transport/deliver controlled medications to and from school.</u>
- 9. Any patterns of non-compliance by the student regarding medication administration will be reported to the parent/guardian and campus administrator as deemed necessary.
- 10. At the end of the school year, all medication must be picked up by the parent/guardian in the nurse's office no later than the last day of school. Any medication left in the nurse's office will be destroyed.

CHANGE in MEDICATION ORDERS

- All changes in current scheduled or PRN medication orders require a new Physician's Request for Administration of Medication by School Personnel form to be completed and signed by parent/guardian. These changes may include type of medication, dosage amount, and time to be administered and/or method of administration.
- 2. Changes in dosage are **never** made at parent or teacher request without written input from the licensed prescribing health care provider.

Original labeled containers are required for all **prescription** and **non-prescription** (over the counter) medication to be administered and must reflect any change in orders.

MEDICATION STORAGE

- 1. All medication to be administered during the school day must be in the original, properly labeled medication container.
- 2. Medication(s) should be stored in a clean and locked cabinet. Cabinets should remain locked and keys should be kept on the person of the nurse or clinic assistant at all times. The school office should have a duplicate set.
- 3. Medication stored in cubicles/drawers /boxes within the medication cabinets should have the name of the student attached.
- 4. All medication caps should be tight and secure.
- 5. Adhere to medication expiration dates. Notify parent/guardian if an expiration date is nearing and request a medication replacement.
- 6. Medication should be stored in temperatures as indicated by the medication manufacturer.
- 7. Medication that requires refrigeration should be kept in refrigerators designated for such and refrigeration temperatures monitored.

STUDENT MEDICATION ADMINISTRATION PROCESS

- 1. Always wash hands use hand sanitizer before and after dispensing medications.
- Prior to medication administration, check student identity, name of medication, dosage amount, route and time of administration. Cross-check with Physician's Request for Administration of Medication by School Personnel form and check for parent/guardian signature. Verify information at least twice.
- 3. Review the electronic or written daily medication documentation log and medication label instructions. If there is any doubt as to the correct student, medication, dosage amount, time and/or route of administration; do not give the medication.
- 4. Record all medications immediately on the written daily medication documentation log. Initial each correct entry via written entry. Be sure to include correct name, time, route, method and dosage.
- 5. Store medication in appropriate location.
- 6. A parent/guardian should be notified if a child has an emesis immediately after medication has been administered. Re-administration of medication should <u>not</u> be attempted.
- 7. Student "refusal" to take medication should be documented and parent/guardian notified

STUDENT IDENTIFICATION

<u>NEVER</u> dispense any medication to a student without definite identification. If there is any doubt as to the identity of the student, do **NOT** give the medication.

- Ask the student to state his/her name (do not prompt; small children will often answer to other names). Compare student photo, if available on ASCENDER system. Print copy of picture, if possible, and tape in medication cabinet next to student's name. If the student is incoherent or unable to speak, try to have another adult identify student if possible and identification is **absolute**.
- 2. Check for student's name on the medication bottle when it is removed from the medicine cabinet and again just before the student takes the medication. Always check at least three times.
- 3. In case of medication error, notify parent/guardian, campus administrator and nurse. Complete a written **Medication Incident Report** form and send to the nurse.

MEDICATION RELATED EMERGENCIES

- After dispensing medication to a student, observe student for any adverse side effects. Failure of a medication to achieve the desired results or resulting in an adverse effect should be reported to the parent/guardian and health care provider as soon as possible. If signs or symptoms of an allergic reaction appear after medication administration; medication should be withheld from the student and a parent/guardian notified. Emergency assistance should be initiated if needed.
- An allergic reaction to a medication(s) may occur at any time regardless of previous use of medication. Notify school nurse immediately. <u>In a life-threatening emergency call 911</u> and notify parent/guardian.
- 3. The most common signs and symptoms of an allergic reaction may include the following: rash, itching, swelling, difficulty breathing, diarrhea, abdominal cramps, and bluish color of skin.
- 4. Never leave a child suspected of having an adverse allergic reaction unattended.
- 5. If a student is taken to the hospital emergency room, provide a copy of the **Physician's Request for Administration of Medication by School Personnel** form and emergency contact information to EMS and/or attending HISD personnel.

MEDICATION ADMINISTRATION SAFETY PRECAUTIONS

The "Rights of Medication Administration" are recommended medical guidelines used for dispensing medication.

The "Rights of Medication Administration" are as follows:

- 1. Right Patient
- 2. Right Medication/Drug
- 3. Right Time of Administration
- 4. Right Method of Administration/Route
- 5. Right Amount/Dose
- 6. Appropriate Documentation

ROUTES OF MEDICATION ADMINISTRATION

1. Oral medication

- a. Pour the tablet/pill from the medication container into the lid of the container or medication cup. Then transfer medication to hand for ingestion. Do not allow student to use lid as cup for dispensing directly into the mouth.
- b. Pour liquid medication into a properly calibrated medication dispensing cup, syringe or cap. Wipe off any drips on medication label before storing medication in locked storage area.
- c. Make sure the student swallows the dispensed medication by checking the oral cavity. Have water readily available for use in swallowing medication as needed.
- d. Return medication to locked cabinet or refrigerator as indicated.
- e. Discard used medication cup and drinking cup.
- f. Correctly document medication administration in the written medication administration log.
- g. Observe student for any immediate adverse reaction(s) or side effects to administered medication.

2. **Topical medications** (ointments, patches, gels, foams and lotions)

- a. Gather necessary equipment (gloves, tongue blade, cotton balls or cotton-tipped applicator).
- b. Wash hands before and after application of topical medication
- c. Apply medication from the medication container onto the appropriate dispensing equipment.
- d. Apply topical medication onto affected area.
- e. Cover site with Band-Aide, gauze or dressing if indicated.
- f. Discard used gloves and application equipment in appropriate trash receptacle.
- g. Return medication(s) to appropriate storage area.
- h. Document medication administration per protocol.
- i. Observe student for any immediate medication adverse reaction or side effects.

3. Eye medications

- a. Eye Drops
 - Wash hands before and after administering eye drops.
 - Explain procedure to student.
 - Give tissue to student for blotting off excess medication.
 - Turn medication container upside down and position over eye(s). Place eye dropper one-half to three/fourths inch above eyeball while holding in dominant hand.
 - Stabilize hand holding dropper as necessary.
 - Expose lower conjunctiva sac (mucous membrane that lines eyelids) by pulling down on lower eyelid.
 - Drop prescribed number of drops into center of conjunctiva sac. Avoid touching tip of dropper directly to any area of the eye.
 - Repeat procedure if student closes eye and drops fall on eyelid.

- Ask student to gently close eyelids and move eyes side to side to assist in spreading medication under the eyelids and over the surface of the eyeball.
- Blot excess medication with clean tissue.
- Replace medication in locked storage area.
- Document medication administration per protocol.
- Observe student for any immediate adverse medication reaction or side effects.
- b. Eye Ointment—same as above except for the following application:
 - Gently separate patient's eyelids with thumb and two fingers or grasp near the margin of the lower lid, immediately below the lashes, exert pressure downward over the bony prominence of the cheek.
 - Student should look upward.
 - Apply eye ointment along the inside edge of the entire lower eyelid, starting at the inner corner.
 - Do not wipe eye to remove ointment

4. Ear Medication

- a. Wash hands before and after medication administration.
- b. Position head to the side, with ear to be treated in the uppermost position.
- c. Apply prescribed amount of medication via dropper as ordered.
- d. Prepare student for instillation of ear medication as follows:
 - Infant—draw the earlobe gently downward and backward
 - Child—lift ear upward and outward
 - e. Instill medication drops, holding dropper slightly above ear canal.
 - f. Student should maintain the same position after application for 1-2 minutes to insure medication is absorbed.
 - g. Dispose of used supplies in trash receptacle.

5. Nose Drops

a. Student should be in a sitting position with head tilted back, or in a supine (lying on back) position with head tilted back over pillow.

- b. Fill dropper with prescribed amount of medication.
- c. Place dropper just inside the nostril and instill correct number of drops.
- d. Instruct student not to squeeze the nose and to keep head tilted back for a few minutes to prevent medication from escaping. Encourage student not to blow nose after application.
- e. Document medication administration per protocol.
- f. Observe student for any immediate adverse medication reaction or side effect.

6. **Metered Dose Inhalers (MDI)**— The preferred method of administration is by using a "spacer" or a holding chamber with a valve



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- Remove the cap from the MDI and chamber. Shake well.
- Insert the MDI into the open end of the chamber (opposite the mouthpiece).
- Place the mouthpiece of the chamber between your teeth and seal your lips tightly around it.
- Breathe out completely.
- Press the canister once.
- Breathe in slowly and completely through your mouth.
- Hold your breath for 10 seconds (count to 10 slowly) to allow the medication to reach the airways of the lung.
- Repeat the above steps for each puff ordered by your doctor. Wait about 1 minute in between puffs.
- Replace the cap on your MDI when finished and return to proper storage location.
- If you are using a <u>corticosteroid</u> MDI, rinse your mouth and gargle using water or mouthwash after each use. You should always use a chamber with a steroid MDI.



- Using an MDI <u>without</u> a chamber
- Remove the cap from the MDI and shake well.
- Breathe out all the way.
- Place the mouthpiece of the inhaler between your teeth and seal your lips tightly around it.
- As you start to breathe in slowly, press down on the canister one time.
- Keep breathing in as slowly and deeply as you can. (It should take about 5 seconds for you to completely breathe in.)
- Hold your breath for 10 seconds (count to 10 slowly) to allow the medication to reach the airways of the lung.
- Repeat the above steps for each puff ordered by your doctor. Wait about 1 minute between puffs.
- Replace the cap on the MDI when finished and return MDI to proper storage location.
- If you are using a corticosteroid MDI, you should use a valved holding chamber as described above.

MEDICATION ADMINISTRATION ERROR

If an error in the administration process of a medication is recognized; initiate the following steps:

a. Keep the student in the nurse's office for observation. If student has already returned to class when the error is discovered, have student escorted to the nurse's office by an adult.

b. Assess student's status.

c. Determine the root of the medication error (incorrect dose, medication, route of administration, wrong time or wrong student).

d. Notify campus administrator and parent/guardian.

e. Notify student's health care provider if parent requests or if unable to contact parent/guardian.

f. If unable to contact student's health care provider or parent, contact the American Association of Poison Control Centers for instructions at **1-800-222-1222.** Provide the following information:

- 1. The name and dose of the medication taken in error.
- 2. The age and approximate weight of student.
- 3. If the student is taking other scheduled medications, provide the name(s), dose(s), and time of last dose, if available.

g. Follow the instructions from the American Association of Poison Control Center, if at all possible. If unable to complete their directions, explain to them the problem so they can determine if the student should be transported for emergency medical care.

h. Submit written documentation on the **Medication Incident Report** form within 24 hours. Include the name of the student, parent/guardian's name and contact information. The Medication Error Report form should include specific information regarding the incident. This should include persons who were notified and what remedial actions were taken along with the time frame of events.

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