

Authorization for Administration of Prescribed Medication(s)/Medical Procedures to Students During School Activities

1. A completed form "Administration of Medication/Medical Procedures" shall be on file for each student requiring medication(s)/medical procedures and will include:
 - a. Name of student, address, phone number and an emergency number.
 - b. Name of medication/medical procedure.
 - c. Purpose of medication/medical procedure.
 - d. Starting date for administering the medication/medical procedure.
 - e. Medication will only be administered from the original prescription container, properly labeled by a registered pharmacist with the appropriate written physician's orders.
 - f. Physician's requirements specifying dosage, frequency and method of administration, including self-possession/self-administration and/or specific equipment needed.
 - g. Physician's description of anticipated reactions of student to the medication/medical procedure.
 - h. Physician's recommendation for self-administration and possession of medication/medical equipment by student during school.
 - i. What to do in case of side effects and emergency incidents.
 - j. Termination date for administering medication/medical procedure.
 - k. Signature of parent/guardian approving the administration of the medication/medical procedure.
2. **No other medication/medical procedure will be administered to students by school personnel under any circumstances without appropriate written physician orders and parent/guardian written authorization.**
3. The school principal, his/her designee, or the school nurse will:
 - a. Inform the classroom teacher of the medication/medical procedure.
 - b. Keep a record of the administration thereof.
 - c. Keep the medication in a securely locked cabinet, excluding prescribed medication possessed and self-administered by student.
 - d. Return unused medication to the parent only.
 - e. Call an ambulance (911) in an emergency situation.
4. Services will be coordinated through the school Student Support Team process to facilitate implementation of the required individualized Section 504 accommodations, if applicable.
5. The parent(s)/guardian(s) of the student must assume full responsibility for providing prescribed medication/medical procedure equipment and for informing the school principal or school nurse of any change in the student's health or change in medication/medical procedure.
6. The "Administration of Medication/Medical Procedure" form must be completed and filed each school year and whenever the prescription is changed by the physician. A copy of this form shall

be filed in the student's personal folder, the school nurse's office and forwarded to the child's parent/guardian.

7. Parent(s)/guardian(s) by signature on the completed "Administration of Medication/Medical Procedure" form acknowledges that the school is providing for the administration of medication/medical procedure as a courtesy to the parent(s)/guardian(s) and agrees to hold the school and school system harmless in its so doing.
8. A copy of the policy and these administrative regulations shall be posted in all school clinics, made available to the school nurse, local health department or other medical providers who take part in delivering health services to students in the system and provided for parents upon their request for administration of medication/medical procedures in the schools.
9. The system retains the right to reject requests for administration of medication/medical procedures.