

POLICY

BOARD OF EDUCATION
LINCOLN PARK

PUPILS
5330/page 1 of 4
Administration of Medication
M

5330 ADMINISTRATION OF MEDICATION

The Board of Education disclaims any and all responsibility for the diagnosis and treatment of the illness of any pupil. At the same time, the Board recognizes that a pupil's attendance may be contingent upon the timely administration of medication duly prescribed by a physician. The Board will permit the dispensation of medication in school only when the pupil's health and continuing attendance in school so require and when the medication is administered in accordance with this policy.

Definitions

For purposes of this policy, "medication" means any prescription drug or over-the-counter medicine or nutritional supplement.

For the purposes of this policy, "self-administration" means carrying and taking medication without the intervention of the school nurse, approved through the school district policy and restricted to pupils with asthma and other life-threatening illnesses.

For the purposes of this policy, "life-threatening illness" means an illness or condition that requires an immediate response to specific symptoms or sequelae (an after effect of disease or injury) that if left untreated may lead to potential loss of life, i.e. adrenaline injection in anaphylaxis.

For the purposes of this policy, "a pre-filled single dose auto-injector mechanism containing epinephrine" means a medical device used for the emergency administration of epinephrine to a pupil for anaphylaxis.

For the purposes of this policy "a noncertified school nurse" means a person who holds a current license as a registered professional nurse from the State Board of Nursing and is employed by the district, and who is not certified as a school nurse by the Department of Education.

For the purposes of this policy "a substitute school nurse" means a person who holds a current license as a registered professional nurse from the State Board of Nursing and who has been issued a county substitute credential to serve as a substitute for a certified school nurse in accordance with N.J.A.C. 6A:9-6.5.

POLICY

BOARD OF EDUCATION
LINCOLN PARK

PUPILS
5330/page 2 of 4
Administration of Medication
M

For the purposes of this policy “a school physician” means a physician with a current license to practice medicine or osteopathy from the New Jersey Board of Medical Examiners who works under contract or as an employee of the district. This physician is referred to as the medical inspector in N.J.S.A. 18A:40-1.

No medication will be administered to pupils in school except by the school physician, a certified or noncertified school nurse, a substitute school nurse employed by the district, or the pupil’s parent(s) or legal guardian(s). A written request for the administration of medication at school must be approved by the Principal. Medication must be delivered to the school nurse by the pupil’s parent(s) or legal guardian(s). The medication must be brought to the school nurse in the original container labeled by the pharmacy or physician. Written orders signed by the pupil’s private physician or an advanced practice nurse for the use of a pre-filled single dose auto-injector mechanism containing epinephrine, must be provided stating the name of the medication, the purpose of its administration to the specific pupil for whom it is intended, its proper timing and dosage, its possible side effects, and the time when its use will be discontinued. If written orders for use of a pre-filled single dose auto-injector mechanism containing epinephrine are provided, the orders must say the pupil requires the administration of epinephrine for anaphylaxis and does not have the capability for self-administration of the medication. These written orders must be reviewed by the school physician prior to school approval for self-administration of any medication. The school physician may also issue standing orders to the school nurse regarding the administration of medication. Medication no longer required must be promptly removed by the parent(s) or legal guardian(s).

The school nurse shall have the primary responsibility for the administration of a pre-filled single dose auto-injector mechanism containing epinephrine. However, the certified school nurse may designate, in consultation with the Board or the Superintendent, another employee of the district trained by the certified school nurse in accord with the "Training Protocols for the Implementation of Emergency Administration of Epinephrine" issued by the New Jersey Department of Education, to administer the pre-filled single dose auto-injector mechanism containing epinephrine when the school nurse is not physically present at the scene. The pupil’s parent(s) or legal guardian(s) must consent in writing to the designated person if applicable. In addition, the parent(s) or legal guardian(s) must be informed that the school district has no liability as a result of any injury arising from the administration of a pre-filled single dose auto-injector mechanism containing epinephrine, and the parent(s) or legal guardian(s) must sign a

POLICY

BOARD OF EDUCATION
LINCOLN PARK

PUPILS
5330/page 3 of 4
Administration of Medication
M

statement that shall indemnify and hold the district and employees harmless against any claims arising from the administration of a pre-filled single dose auto-injector mechanism containing epinephrine. The permission for the emergency administration of epinephrine via a pre-filled single dose auto-injector mechanism containing epinephrine to pupils for anaphylaxis is effective for the school year it is granted and must be renewed for each subsequent school year.

Self-administration of medication by pupils is permitted in accordance with N.J.S.A. 18A:40-12.3. A pupil is only permitted to self-administer medication for asthma or other potentially life-threatening illnesses as defined by the Department of Education, New Jersey Statutes Annotated and New Jersey Administrative Code. Permission for self-administration of medication must comply with the conditions set forth in Regulation No. 5330.

Each school in the district shall have and maintain for the use of pupils at least one nebulizer in the office of the school nurse or a similar accessible location. Each certified school nurse or other persons authorized to administer asthma medication will receive training in airway management and in the use of nebulizers and inhalers consistent with State Department of Education regulations. Every pupil that is authorized to use self-administered asthma medication pursuant to N.J.S.A. 18A:40-12.3 or a nebulizer must have an asthma treatment plan prepared by the pupil's physician which shall identify, at a minimum, asthma triggers, the treatment plan and other such elements as required by the Department of Education.

All pupil medications shall be appropriately maintained and secured by the school nurse, except those medications to be self-administered by pupils. In those instances the medication may be retained by the pupil with the prior knowledge of the school nurse. The school nurse may provide the Principal and other teaching staff members concerned with the pupil's educational progress with such information about the medication and its administration as may be in the pupil's best educational interests. The school nurse may report to the school physician any pupil who appears to be affected adversely by the administration of medication and may recommend to the Principal the pupil's exclusion pursuant to law.

POLICY

BOARD OF EDUCATION
LINCOLN PARK

PUPILS
5330/page 4 of 4
Administration of Medication
M

The school nurse shall document each instance of the administration of medication to a pupil. Pupils self-administering medication shall report each incident to a teacher, coach or other individual designated by the school nurse who is supervising the pupil during the school activity when the pupil self-administers. These designated individuals shall report such incidents to the school nurse within twenty-four hours of the self-administration of medication. The school nurse shall preserve records and documentation regarding the self-administration of medication in the pupil's health file.

N.J.S.A. 18A:6-1.1; 18A:40-3.1; 18A:40-6; 18A:40-7; 18A:40-12.3; 18A:40-12.4;
18A:40-12.5; 18A:40-12.6; 18A:40-12.7; 18A:40-12.8

N.J.S.A. 45:11-23

N.J.A.C. 6A:16-2.3(b)

New Jersey Department of Education, Training Protocols for the Implementation of
Emergency Administration of Epinephrine, 16 November 1998

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