

Manawa School District
Administration of
Student Medication
Policy and Procedures



Table of Contents

Section	Page Number
Introduction	
Policy	
Prescription Medication Policy.....	4
Non-Prescription Medication Policy.....	4
General Policies for Prescription and Non Prescription Medication.....	5
Procedures	
General Information.....	6
Procedure for Non-Prescription Medication.....	7
Procedure for Prescription Medication.....	7
Procedure for storage of Prescription Medication.....	8
Administrative and Record-keeping information For Prescription Medication.....	9
Reporting Errors in Medication Administration.....	9
Emergency Administration of Medication by Means Other Than Ingestion (orally).....	10
Asthma, Inhalers, Epi-Pens and Nebulizer.....	10-13
Medication administration on Field Trips.....	13-15
Handling Theft of Student Medication.....	15
Disposal of Medications.....	16
Wisconsin Statute Section 118.29 or Administration of Drugs to Pupils.....	17-19
Example medication label.....	20

I. INTRODUCTION

The Manawa Public school District is committed to providing the safe administration of medication to our students during the school day. Most students take their medication from ~~parent~~parents / ~~guardians~~ -at home. However, under exceptional circumstances, some students will need to take their medication during ~~the~~ school hours.

This document is designed to assist principals and school staff with the policy and procedures that ensure the safe administration of medication to students.

In March, 2010, the Wisconsin State legislature revised the state's law regarding medication administration in schools. In December 2011, Wisconsin Statute section 118.29, or the medication law, was further revised. This medication policy and procedure, captures the changes in the medication law. A copy of the law is located in the appendix of this manual.

This document is the product of collaboration between School Board, Nursing, and the District Administrator.

We have focused our staff medication administration education on the 5 R's: right child, right medication, right dose, right time and right route.

[In schools, school nurses serve as a resource for parent / guardians / guardians, administration and staff with questions about medications.](#) The design of this document is to assist the principal or school leader, professional nursing staff and other staff who volunteer to administer medication.

II. POLICY STATEMENTS FOR PRESCRIPTION AND NON-PRESCRIPTION MEDICATION

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A. Prescription Medication Policy

Whenever possible, medications should be administered by the ~~parent~~parent / ~~s~~-guardian to the school children while the child is at home. When medications are required during the school day ~~timeframe~~, the school principal, or other persons designated by the school principal, may administer medications to students under established procedures and conditions and in compliance with Wisconsin State Statute 118.29.

Before any prescription medication may be administered to a student during the school day in the Manawa public schools, school personnel must receive written and signed ~~parent~~parent / ~~a~~guardian/legal guardian consent and the written and signed instructions from the child's medical provider annually.

The school administrator or his/her designated school nurse shall be responsible for reviewing the written prescribed medication instructions periodically.

The school administrator or his/her designated school nurse shall develop a method of confidentiality of the student's medication files.

In addition, the school administrator shall be responsible for designating maintenance of complete and accurate medication records and the storing of all prescription medications in a safe and secure place.

All school personnel authorized to administer prescribed medications to students shall be provided with appropriate training, instruction and full review of the policy and procedures of the school district. A copy of their certificate of completion of the Department of Public Instruction-approved medication administration training will be kept in the medication binder or folder along with the medical orders and medication sign out sheets.

The three exceptions to this policy are confined to the administration of Albuterol rescue inhaler, Epinephrine by auto injector and Benadryl. Epinephrine by auto injector may be administered to any who appears to be experiencing severe anaphylactic reaction. Based on a standing order by the Medical Advisor, Albuterol may be administered to any student with asthma-like symptoms with parent / guardian / guardian permission. In all three cases, these emergency medications must be administered by a nurse.

No school personnel shall be required to administer any prescribed medications(s) to a student by any means other than orally.

School personnel will be informed on a need-~~to~~-know basis when a student is taking medication for serious or chronic health conditions, so that they can observe for side effects to the medications.

B. Non-Prescription Medication Policy

Non-prescription, over-the-counter medications should be administered to school children by ~~parent~~parent / ~~guardians~~-at home whenever possible. School personnel may administer and/or supervise self-administration of non-prescription medications under the following established procedures and conditions:

Prior to any non-prescription medication being administered by school personnel and/or self administered by a student in Manawa public Schools, **the school administrator or his/her designated school nurse must receive written ~~parent~~parent / ~~a~~legal guardian consent and instructions annually.**

Medication must be presented in the ~~Am~~ manufacturer's labeled, sealed bottle with dosages appropriate to the age and size of the child.

The bottle or container must be labeled with the child's name.

If the child is taking prescription medication at school (behavior, anti-seizure, etc.), the prescribing physician must sign off on the over-the-counter medication form, prior to administering the medication, to prevent medication contraindications.

If the ~~parent~~ parent / guardian ~~is~~ are requesting a dosage that is greater than the recommended therapeutic dose, ~~they~~ he/she will need to have their physician or licensed medical provider complete the prescription medication authorization form.

C. General Policies for Prescription and Non-Prescription Medication

Medication, prescription or over-the-counter, may be kept in a classroom if a locked, secure area can be found. Classroom teachers administering medications to students will also need to complete the DPI-approved medication administration training program prior to administering medication.

Beginning in December, ~~of~~ 2011, school personnel assigned to administer daily oral medications must have successfully completed the DPI-approved medication training. Teachers and staff administering oral medication on fieldtrips must have a properly labeled (see appendix for sample label) medication.

For administration of injection, rectal, inhaled and ostomy tube medications, they also need to successfully complete medication training. ~~The~~ teachers or staff must successfully complete the DPI - ~~a~~ approved medication administration training in advance of the fieldtrip. ~~Teachers or staff organizing field trips or school sponsored activities are personally responsible for completion of appropriate training prior to scheduled activity. Failure to successfully complete the training in advance of the field trip leaves the teacher or staff member personally liable for any subsequent claims.~~

III. **Procedures** for the Administration of Prescription and Non-Prescription Medication in the Manawa School District.

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A. General Information:

Prescription medications are those medications that are obtainable only with the written prescription of a licensed physician or licensed medical provider.

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All prescription drugs that may be administered in school setting must be listed in the US Pharmacopoeia or National Formulary.

Non-prescription medications are those medications that can be obtained over-the-counter from a registered pharmacy (i.e. Walgreen's, CVS, etc.).

All non-prescription medications that may be administered in a school setting must be listed in the National Formulary or official homeopathic pharmacopoeia.

NO MEDICATION will be administered by non-school nursing personnel unless the Medication Administration Consent Form is completed by the ~~parent~~parent / guardian/legal guardian and the licensed medical provider of the child and is returned to the school office.

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A licensed nurse can take a verbal order from the physician or licensed medical provider for a **prescription medication**; however, this must be followed up with a written order within two working days.

A new form must be completed **each year** and whenever the physician changes the prescription and/or the prescribed dosage.

B. Procedure for Administering Non-Prescription Medication:

1. Designated personnel shall administer non-prescription (over-the-counter) medication to students only with ~~parent~~parent / ~~guardian/legal guardian~~ approval as indicated by written consent on the Medication Administration Consent form. This form is to remain at the school site. The Medication Record Sheet, on the back of the signed order shall be completed with each dose given.
2. All criteria listed previously concerning prescription medications shall be adhered to ~~regarding the non-prescription medications~~ with the exception of the written authorization from the physician. Exception is if child is already taking prescription medications or the ~~parent~~parent / ~~guardian~~ requests a dosage that exceeds the recommended therapeutic dosage; a physician needs to sign off on the over-the-counter medication.
3. Under no circumstances should school personnel provide aspirin or other non-prescription medications to students without meeting all of the above criteria.
Phone consent by ~~parent~~parent / ~~guardians or guardian~~ for any medication including over the counter medication is not permissible.

Copies of completed consent forms are to be maintained in the health room of each school building. Upon discontinuance of medication or at the end of the school year, over-the-counter medication consent forms and the Medication Administration Record Sheet are to be filed in the student's cumulative folder.

C. Procedure for Administering Prescription Medication:

1. Medications to be administered at school must have the following information printed in language understandable to the lay person in charge of administering the medication to the student whose name appears on the pharmaceutical container:
Child's full name
Name of drug and dosage
Time drug is to be administered
Quantity of drug to be administered
Physician's name
Pharmacy's name and telephone number
Quantity of medication in the pharmaceutical container (actual count may be different than amount on the label, due to ~~parent~~parent / ~~guardian~~ taking out home supply)
(NOTE: Authorized staff assigned to administer medication **must count** the number of pills in the pharmaceutical container upon receipt (this is imperative when the medication is "controlled substance" such as Ritalin).

When a new supply of a controlled substance is brought to school, the quantity of pills should be verified and co-signed by the school administrator or other staff on the back of the Medication Administration Record Sheet. A ~~parent~~ parent / guardian or guardian may also observe the count and sign the back of the Medication Record Sheet.

2. All prescription medications require a medical provider and ~~parent~~ parent / guardian's written permission. For non-prescription, ~~parent~~ parent / guardian's written permission is required.
3. Medications will be taken by the child at the designated time, administered by the individuals(s) who have been trained and authorized in writing by the school principal to do so. All school staff administering medication must successfully complete the DPI approved medication administration training for oral medication ~~for~~ every four years.
4. School personnel will need to obtain their learning certificate through the TRAIN software program. The School Nurse must keep a copy in a binder or folder. The TRAIN website is available at: <https://wi.train.org/DesktopShell.aspx>. It is the responsibility of the student to go to the office at the designated time to get his/her medication. Consideration should be given for age and the ability of the student to safely assume this responsibility. The school designee shall locate the child who is in school who fails to report for the prescribed medication. Failure to do so, ~~constitutes constituents~~ a medication error ~~and, and~~ an incident report must be completed. If the school designee is unable to locate the child, due to absence or truancy, the school designee shall note the absence ~~of on~~ the Medication Record Sheet and contact the ~~parent~~ parent / guardian/legal guardian immediately.
5. If the student refuses to take the prescribed medication, the ~~parent~~ parent / guardian/legal guardian will ~~—~~ be contacted immediately. The student's medication log record shall reflect the reason student did not take prescribed medication(s) (i.e. not in attendance, vomited up, refused, error, etc.).
6. In order to monitor this function, the school administrator must identify **at least two (2) people per school building who will administer the prescribed medications**. Individuals authorized to administer prescribed medications to students shall receive appropriate DP-1 approved instruction and training concerning the process.
7. Dispensing of medications ~~should beshall be~~ monitored a minimum of one time per semester by the school administrator or school nurse.

D. Procedure for Storage of Prescription Medications:

1. Only limited quantities of any prescribed medications are to be kept at the school.
2. Prescription medications are to be kept in a safe, locked location, not accessible to students or other people in the building, and ~~accessed-checked out only to-by~~ **a district employee or agent designated to administer the medication**.
3. Any keys to a file, cabinet or desk where medications are locked, must be placed in a secure location not accessible by other staff or students. This location must be accessible only by those designated to administer medications.
4. **The keys to the nurse's office ~~should-should never leave the school grounds. The keys to the nurse's office should~~ not be hung with the other keys. Only the principal, district administrator, health aide, and school nurse should have access to the nurse's office.**
5. When medications arrive at school, the medication must be immediately secured.
6. Medications may require refrigeration and the school should store these medications accordingly. If refrigeration storage is not available, the child's medical provider shall be advised immediately.

7. Exceptions shall be approved by the provider.
8. The nurse's office should not be used for other functions when the nurse is not in the building.
9. Medication, prescription or over-the-counter, may be kept in a classroom if a locked, secure area can be found. Classroom teachers administering medication to students on a daily basis will also need to complete the DPI-approved medication administration training program prior to administering medication.

Example: teacher of the autistic may wish to provide the medication to his/her student to minimize disruption of the student's routine. The teacher ~~is would be~~ expected to maintain the Medication Record Sheet, record the amount of medication provided by the family and be observed by the administrator or school nurse, to ensure proper procedures are used.

E. Administrative and Record Keeping Information for Prescription Medication:

1. Accurate and confidential written records shall be established and maintained for each student receiving medication:

The school principal or designee shall maintain a daily up-to-date record of students in his/her school requiring medications during school hours.

The record shall include the school name, school year, student's name, grade level, type of medication, dosage, time to be given, frequency, route, ~~parent~~parent / guardian/legal guardian's name, physician's name and signature, (listed on the medication permission and instruction form), and the date ~~which~~ the medication is to be discontinued, if it is to be discontinued during the school year.

Copies of completed consent forms are to be maintained in the health room of each school building. Upon discontinuance of medication or at the end of the school year, medication consent forms and the Medication Record Sheet are to be filed in the student's cumulative folder.

School personnel will report any unusual behavior of students on prescribed medications to the school principal, designated school administrator, or school nurse and these will be shared with the ~~parent~~parent / guardians and/or physician as soon as possible.

2. Should assistance be required regarding the administration of, or side effects from, the prescribed student's medications, the child's medical provider should be contacted. If unable to reach the child's medical provider, contact the pharmacist listed on the medicine container.

3. ~~Parent~~Parent / guardians should be informed that any prescribed medication remaining at the end of the school year should be picked up by the ~~parent~~parent / guardian or the prescribed student's medication(s) will be disposed of by the school administrator or school nurse in a school district-recommended manner.

4. NEW written instructions must be received from the medical provider if the drug is to be discontinued, the dosage changed, or the time the medication is to be administered is changed from the original instruction.

~~5. If a parent reports that a medication has been discontinued, the physician or licensed medical provider needs to sign a new Medication Administration Consent form and fax it to the school stating medication discontinued.~~

6. Students who miss their first dosage at home in the morning, ~~and the child or parent contacts school to have a dose administered early,~~ shall be advised that ~~the dose will be administered at school this can only occur~~ if the prescribing provider can be reached for a revised medication authorization. Such authorization from prescribed physician must be in writing for non-nursing school staff.

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F. REPORTING ERRORS IN MEDICATION ADMINISTRATION

The first and foremost consideration when an error in medication administration occurs ~~is made,~~ is the safety of the child who consumed the medication.

The definition of medication error is the one or more of the following events occurring when administering a medication:

Wrong student receives a medication. Taking pictures of the student and placing on the medication log can prevent this occurrence.

Wrong medication is administered to the student. Taking picture of the prescribed medication can facilitate the correct administration of the medication. Many medication ~~'s~~ look alike ~~is~~ ideally a nurse should verify the contents and dose of medications.

Wrong dosage of medication is administered to the student. An incorrect reading of milligrams, grams, milliliters, cubic centimeters, or international units.

Wrong time of administration of the medication. To be considered on time, a medication must be administered within 30 minutes ~~a half hour before or after~~ the prescribed time.

~~There are events that may occur during medication~~ Some medication administration events ~~which~~ are not considered medication errors: ~~if a parent/ guardian~~ requests that the school hold a prescribed medication, ~~the a parent/ guardian~~ has ~~ed~~ this right and this ~~is would not be~~ an error. If a student cannot tolerate the medication and vomits the medication after administration, this is not an error. ~~In the event, the~~ if the student refuses to receive the medication or refuses to take the medication, the parent/ guardian should be notified before the end of the school day. All of these situations should be documented in the medication log on the medication administration record.

Procedures when a Medication Error occurs

1. Immediately contacting the child's medical provider for guidance immediately is primary. (Checking the Emergency Card or ESIS "Medical" screen may provide assistance with the phone numbers). The school designee must immediately advise his or her school principal of the error and contact the child's medical provider for further instructions. If the student's medical provider cannot be reached, contact Poison Control IMMEDIATELY at 1-800-222-1222. Poison Control will advise you regarding appropriate first aid and follow-up (calling 911, etc.) based on the medication and dose consumed.
2. The principal or designee must then contact the student's parent/ guardian or guardian and advise them of the circumstances, the condition of the student, and the action taken.
3. After the student is stable, complete the incident report. The school principal or district administrator shall contact his or her Regional Executive Specialist, the Division of Benefits and Insurance or Safety and Risk Management Specialist. FAX a copy of the Health Service Incident Report to Director of Health Services at DPI.

G. Emergency administration of medications by means other than ingestion (orally):

1. School personnel are not required to administer medications by means other than ingestion (orally).

2. Personnel designated by the school principal to administer medications may indicate a willingness to provide medications in an emergency by means other than ingestion (orally). These personnel shall receive appropriate instruction from the student's medical provider and ~~parent~~parent / guardian/legal guardian and/or nursing personnel, when applicable before administering these types of medications.

H. Asthma inhalers, Epi-Pens, and nebulizer treatments:

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In accordance with state law, schools recognize the importance of students being allowed to carry an Asthma inhaler or epi-pen in case of an emergency need by the student (Wis. Stat. sec. 118.291 and 118.292). The inhaler and/ or the Epi Pen are prescribed medications and the rules and regulations of the Manawa School District, in compliance with Wisconsin State Statute 118.29, must still be adhered to, in the administration of these forms of medications.

1. Asthma inhalers:

- a. By law, students may self-carry a rescue inhaler on his/her person with the waiver section of medication administration consent form completed and signed by the student's licensed medical provider, principal, school nurse and the ~~parent~~parent / guardian/legal guardian (refer to the section on authorization release forms of this manual) (Wis. Stat. sec 118.291). If school personnel are ~~providing supervision of supervising~~ **self administering medication, they should have successfully completed a DPI approved MDI/inhaler training.**
- b. The waiver to "carry medication on person" section must be completed. The school is absolved from any responsibility including safeguarding the student's inhaler.
- c. ~~There may exist a time when~~ The ~~parent~~parent / guardian may want to have the school secure an "extra inhaler" in case of any emergency, should the child lose the one in his/her possession.
- d. If the ~~parent~~parent / guardian/legal guardian ~~believes requests~~ an inhaler should be kept in the school office or classroom, a **"Medication Form" must be completed and signed by the child's licensed medical provider and the ~~parent~~parent / guardian/legal guardian.** Such medications may be kept in a secure place in the classroom by the student's teacher, along with the required Medication Record Sheet. In such cases where it is not deemed appropriate, the emergency medication will be kept in a secure place by the school principal or his/her designee, taking into consideration the need for emergency access to the medication.
- e. At any time that the school principal or his/her designated school administration is informed or witnesses that the student is abusing the inhaler or managing it inappropriately, the school principal shall inform the ~~parent~~parent / guardian/legal guardian of his/her child's behavior with the inhaler. At that time, ~~further directions as to the manner in which to manage the administration of the prescribed medication shall be resolved. a new medication administration plan for this student should be put in place.~~

2. **Epinephrine:** All epinephrine will be administered via an Epi-Pen Auto Injection or similar epinephrine delivery system. Responsible students will be allowed to carry and self-administer epinephrine. However, due to the potential severity of allergic reaction, the district shall require that students who carry and self-administer epinephrine to:

- a. Have written ~~parent~~parent / guardian/legal guardian ~~a~~ and the health care provider's signed authorization forms on file (in the event the student is unable to respond and administer the medication, school personnel will be able to assume procedure).
- b. Review with the school nurse or trained staff, the technique of administering the epinephrine.
- c. Seek help immediately if they have been stung and are going to administer epinephrine.

School district employees may administer ~~E~~epinephrine to students who:

- a. Have written ~~parent~~parent / guardian/legal guardian permission consent forms for epinephrine administration on file with the school principal.
- b. Have written medication authorization forms on file stating specific directions for administration of epinephrine.

Any district employee may be authorized to administer epinephrine who:

- a. Is willing to assume that responsibility.
- b. Is authorized in writing by the school principal or his/her designee.
- c. Has been ~~sufficiently~~ instructed by the student's health care provider, ~~has received~~ DPI - approved ~~or school nurse~~ training course ~~and/or school nurse~~ in recognizing the signs and symptoms of allergic reaction AND on the proper administration of the Epi-Pen Injection.

In accordance with state law, any student receiving ~~E~~epinephrine for a possible allergic reaction will be ~~i~~mmmediately transported to the nearest hospital via EMT unit Emergency Transport (Wis. Stat. sec 118.29(2)2m). The used Epi-Pen cartridge will be sent along to the hospital with the EMT's.

ANY TIME A LIFE-THREATENING SITUATION IS SUSPECTED:

- a. Direct another person to notify the office to call 9-911 and request paramedic assistance. The caller should include:
 1. The ill or injured person's location
 2. The ill or injured person's suspected injury/illness (i.e.: allergic reaction, bee sting, etc.)
 3. Student/staff member name.
- b. Follow general procedures for ~~L~~ife ~~T~~hreatening ~~E~~mergency, including notifying ~~parent~~parent / guardians. First aid responder should remain with the student/staff member until the rescue squad arrives.
- c. Complete an incident/accident report.

- d. Route incident/accident report to the appropriate supervisor-including the principal, nursing supervisor, risk management as soon as situation is stabilized.
- e. If incident occurs outside of regular school hours, the principal and/or district administrator should be notified ASAP to help with resolving event and corresponding with ~~parent~~parent / guardians.

3 Nebulizer (administration of medications via aerosol mist treatments):

- a. AEROSOL MEDICATIONS will be administered under the supervision of the school building administrator, school nurse or his/her designee in accordance with medical provider’s orders, ~~parent~~parent / guardian/legal guardian consent and manufacturer’s instructions for specific equipment used.
- b. ~~Parent~~Parent / guardian / legal guardian must provide the prescribed medications and all individual disposable items necessary to administer the medication (mouth piece, corrugated tubing, cup holder, etc.) A medication administration consent form must be completed by ~~parent~~parent / guardian and signed by a physician, signature.
- c. Staff personnel assigned to assist the student with the administration of the aerosol medication will receive DPI-approved training from the school nurse or DPI-approved online course and will be available for the general and/ or direct supervision of the student during the procedure including set-up and clean-up.
- d. Staff personnel must be willing to assume this responsibility.
- e. The school nurse will determine the competency of the individual assigned to administer the medication and will provide the necessary instruction, supervision and evaluation.
- f. All medication changes will be under the general supervision of the school principal in collaboration with the school nurse.
- g. School principal or his/her designee will assist the school nurse in determining where treatments will be administered and where equipment will be maintained (cleansed, air-dried, and stored).
- h. Nebulizer treatments prescribed as “PRN” or “as needed” will be accompanied by specific guidelines from the student’s medical provider.
- i. All treatments will be recorded on a Medication Record Sheet and shared with the ~~parent~~parent / guardian by phone, note, or in-person conversation.

J. Medication administration procedures for students on field trips:

Many students who receive medication at school also attend school field trips, whether one day trips or overnight/extended field trips. This procedure applies equally to the administration of prescription and non-prescription medication during any Manawa School District sponsored field trip or after school activity.

- a. Before the field trip:

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1. Field trip planning should begin far in advance of any field trip. At least fourteen (14) days prior to the field trip, the teacher or staff responsible for the field trip is responsible for obtaining a first aid kit and forwarding a list of students participating to the health room staff.
2. A list of any pertinent health care or medication needs for each student will be returned by health room staff to person responsible for the field trip no greater than four (4) business days after receiving list of students. The principal or his/her designee must ensure that the teacher or staff member responsible for the field trip and any other staff member responsible for administering medication on the field trip has successfully completed the DPI approved training for oral medication, inhalers, or Epi-pens depending on the medication needs of the students.
3. No less than one (1) day prior to the field trip, the trained staff member shall collect the necessary medication for each student.
4. The staff member responsible for administering medication to a student on the field trip must be aware of any side-effects of the medication and the contact person should an emergency occur.

Training Requirements for Fieldtrips

Oral medication:

For field trips and after-school programs, staff must read and understand all information on medication:

**name of the student

**name of the medication

**dose

**time of the dose

The school nurse or administrator must confirm information above is clearly marked on medication provided for field trip.

Inhalers and EpiPens:

The following outlines when certain medication administration training is required by the Department of Public Instruction for a staff member attending the field trip:

Inhalers – At least one staff member must take the DPI webcast training on inhalers only when ANY student below grade 5 or with a cognitive disability is prescribed an inhaler and has provided appropriate forms for administration at school. The staff member must also have a “skill check” with a school nurse. Students who can self-administer inhalers and have an appropriate medication self-carry permission form signed and on file can carry and use their own inhalers without help from the teacher - and a special medication administration course is not required.

EpiPens – At least one staff member must take the DPI webcast training when ANY student attending the field trip is prescribed an EpiPen and has provided the appropriate forms for use of an EpiPen. The staff member must also have a “skill check” with a school nurse.

Webcasts for both Inhalers and EpiPens can be found at <http://dpi.state.wi.us/sspw/medtraining.html>.

IMPORTANT NOTE

Each administrator is ultimately responsible for medication administration in his/her building and must complete the training to ensure compliance with the new state law. This is in addition to, not in lieu of, having staff trained at your school. The district will continue to update information for administrators and staff as it receives further clarification and Frequently Asked Questions from DPI. Manawa School District personnel may not prohibit students requiring medication from attending any field trip due to failure of Manawa School District personnel to obtain training and/or appropriate documentation. Field trips are not permitted unless trained Manawa School District personnel (as outlined above) are present on the field trip.

B. Following the Field Trip:

The staff member(s) assigned to administer student prescribed medications during the field trip will be responsible for the following:

1. Take unused medication to the health office so that the appropriate records can be made immediately upon return from the field trip.
2. Within three (3) days following the field trip, the responsible staff member must transfer all information from the field trip prescribed medication, including date and time the medication was administered.
3. The staff member must then sign the reverse side of the Medication Administration Record Sheet with full name and initials.

J. Handling the Theft of Student Medication Administered by Staff:

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As soon as the theft is discovered, the ~~school leader~~ building principal or school employee must:

1. Contact Manawa Police Department Non-Emergency Line and report the theft.
2. Contact School District Administrator and School Principal.
3. Contact the ~~parent~~ parent / guardian and advise them of the actions taken and appropriate need (i.e. replacing medications, etc). Each situation is unique and follow-up to the incident will depend upon the police investigation and consequences. The District’s primary concern is the safety of the child and if the medication is crucial to their well being, replacing the missing medication as soon as possible is necessary. Ensuring that subsequent thefts do not occur is the responsibility of the principal and ~~Sschool Ssafety Sstaff~~ and steps need to be taken to prevent a subsequent theft.

K. Disposal of Medications:

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The following procedures are to be utilized when a student receiving medication at school transfers to another school, leaves school, or the school year ends.

1. The school must contact the student's ~~parent~~parent / guardian or guardian **by phone and in writing**, and inform them that they must pick up the prescription within thirty (30) days.
2. If a ~~parent~~parent / guardian fails to pick up the medication, the school ~~should~~ **will** secure the medication until the end of the school year.
3. Prior to the end of the school year, the school must contact the ~~parent~~parent / guardian or guardian of any student receiving a controlled substance at school, **by phone**, and inform them that they must pick up the medication by the last day of school and provide that date. The school must also inform the ~~parent~~parent / guardian or guardian that if he/she fails to pick up the medication, it will be discarded per the instructions contained in this procedure.
4. The date of these communications, as well as the date of pick-up, or failure to pick-up must be recorded on the back of the Medication Record Sheet.

After the last day of school, if a ~~parent~~parent / guardian has not picked up the medication or made other arrangements, the school must dispose of the medication in the following manner:

- a. To dispose of medication, used coffee grounds should be put in a zip lock bag and the medications dumped into the coffee grounds. The zip lock bag should be sealed and put in the bottom of the sharps container. Within hours, the medication will dissolve and become dissolute.
- b. For each bottle of medication placed in the coffee grounds, two staff must witness the action and sign off on the Medication Administration Record Sheet.
- c. Over-the-counter medications that which have not been picked up may be thrown in the garbage in their original container. This action should be noted on the Medication Record Sheet and signed by witnesses.

~~e~~d. Sharps shall be disposed of in closeable, puncture-resistant, disposable containers that are leak-proof on the sides and bottom and that are clearly labeled or color-coded. These containers shall always be maintained in an upright position, easily accessible to sharps users, and located as close as feasible to the immediate area where sharps are used or can be reasonably anticipated to be found. Sharps containers shall be replaced and contents disposed of **as needed**. The sharps container should be replaced when it is approximately 75% full.

~~e~~e. All other routes of medication and medical conditions requiring administration that are not **ad**ressed specifically in this policy must be outlined in the child's individual medical management plan.

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118.29 Administration of drugs to pupils and emergency care.

(1) DEFINITIONS. In this section:

- (a)** "Administer" means the direct application of a nonprescription drug product or prescription drug, whether by injection, ingestion or other means, to the human body.
- (b)** "Drug" means any substance recognized as a drug in the official U.S. pharmacopoeia and national formulary or official homeopathic pharmacopoeia of the United States or any supplement to either of them.
- (bg)** "Drug product" means a specific drug or drugs in a specific dosage form and strength from a known source of manufacture.
- (bm)** "Epinephrine auto-injector" means a device used for the automatic injection of epinephrine into the human body.
- (c)** "Health care professional" means a person licensed as an emergency medical technician under s. 256.15, a person certified as a first responder under s. 256.15 (8) or any person licensed, certified, permitted or registered under chs. 441 or 446 to 449.
- (d)** "High degree of negligence" means criminal negligence, as defined in s. 939.25 (1).
- (dm)** "Nonprescription drug product" means any nonnarcotic drug product which may be sold without a prescription order and which is prepackaged for use by consumers and labeled in accordance with the requirements of state and federal law.
- (e)** "Practitioner" means any physician, dentist, optometrist, physician assistant, advanced practice nurse prescriber, or podiatrist licensed in any state.
- (f)** "Prescription drug" has the meaning specified in s. 450.01 (20).

(2) AUTHORITY TO ADMINISTER DRUGS; CIVIL LIABILITY EXEMPTION.

- (a)** Notwithstanding chs. 441, 447, 448, and 450, a school bus operator validly authorized under ss. 343.12 and 343.17 (3) (c) to operate the school bus he or she is operating, any school employee or volunteer, county children with disabilities education board employee or volunteer or cooperative educational service agency employee or volunteer authorized in writing by the administrator of the school district, the board or the agency, respectively, or by a school principal, any private school employee or volunteer authorized in writing by a private school administrator or private school principal, and any tribal school employee or volunteer authorized in writing by a tribal school administrator or tribal school principal:

1.

- a.** Except as provided in subd. 1. b., may administer any nonprescription drug product which may lawfully be sold over the counter without a prescription to a pupil in compliance with the written instructions of the pupil's parent or guardian if the pupil's parent or guardian consents in writing. If the nonprescription drug product is supplied by the pupil's parent or guardian, the nonprescription drug product shall be supplied in the original manufacturer's package, and the package must list the ingredients and recommended therapeutic dose in a legible format.
- b.** May administer a nonprescription drug product to a pupil in a dosage other than the recommended therapeutic dose only if the request to do so is accompanied by the written approval of the pupil's practitioner.

2. May administer a prescription drug to a pupil in compliance with the written instructions of a practitioner if the pupil's parent or guardian consents in writing; the prescription drug is supplied in the original pharmacy-labeled package; and the package specifies the name of the pupil, the name of the prescriber, the name of the prescription drug, the dose, the effective date, and the directions in a legible format.
- 2m. Except for epinephrine administered under subd. 2., may use an epinephrine auto-injector to administer epinephrine to any pupil who appears to be experiencing a severe allergic reaction if, as soon as practicable, the school bus operator, employee or volunteer reports the allergic reaction by dialing the telephone number "911" or, in an area in which the telephone number "911" is not available, the telephone number for an emergency medical service provider.
- 2r. Except for glucagon administered under subd. 2., may administer glucagon to any pupil who the school bus driver, employee, or volunteer knows is diabetic and who appears to be experiencing a severe low blood sugar event with altered consciousness if, as soon as practicable, the school bus operator, employee, or volunteer reports the event by dialing the telephone number "911" or, in an area in which the telephone number "911" is not available, the telephone number for an emergency medical service provider.
3. Subject to sub. (4m), is immune from civil liability for his or her acts or omissions in administering a nonprescription drug product or prescription drug to a pupil under subd. 1., 2., 2m., or 2r. unless the act is in violation of sub. (6) or the act or omission constitutes a high degree of negligence. This subdivision does not apply to health care professionals.
- (b) Subject to sub. (4m), any school district administrator, county children with disabilities education board administrator, cooperative educational service agency administrator, public, private, or tribal school principal, or private or tribal school administrator who authorizes an employee or volunteer to administer a nonprescription drug product or prescription drug to a pupil under par. (a) is immune from civil liability for the act of authorization unless it constitutes a high degree of negligence or the administrator or principal authorizes a person who has not received the required training under sub. (6) to administer a nonprescription drug product or prescription drug to a pupil.
- (3) EMERGENCY CARE; CIVIL LIABILITY EXEMPTION. Any school bus operator validly authorized under ss. 343.12 and 343.17 (3) (c) to operate the school bus he or she is operating and any public, private, or tribal school employee or volunteer, county children with disabilities education board employee or volunteer, or cooperative educational service agency employee or volunteer, other than a health care professional, who in good faith renders emergency care to a pupil of a public, private, or tribal school is immune from civil liability for his or her acts or omissions in rendering such emergency care. The immunity from civil liability provided under this subsection is in addition to and not in lieu of that provided under s. 895.48 (1).
- (4) WRITTEN POLICIES. Any school board, county children with disabilities education board, cooperative educational service agency or governing body of a private school whose employees or volunteers may be authorized to administer nonprescription drug products or prescription drugs to pupils under this section shall adopt a written policy governing the administration of nonprescription drug products and prescription drugs to pupils. In developing the policy, the school board, board, agency or governing body shall seek the assistance of one or more school nurses who are employees of the school board, board, agency or governing body or are providing services or consultation under s. 121.02 (1) (g). The policy shall include procedures for obtaining and filing in the school or other appropriate facility the written instructions and consent required under sub. (2) (a), for the periodic review of such written instructions by a registered nurse licensed under s.441.06 or in a party state, as defined in s. 441.50 (2) (j), for the storing of nonprescription drug products and prescription drugs, and for record keeping, including documenting the administration of each dose, including errors.
- (4m) APPLICABILITY TO TRIBAL SCHOOL EMPLOYEES. The immunity under sub. (2) applies to a tribal school employee, administrator, or volunteer only if the governing body of the tribal school has adopted a written policy that complies with sub. (4).

(5) EXEMPTION. No employee except a health care professional may be required to administer a nonprescription drug product or prescription drug to a pupil under this section by any means other than ingestion.

(6) TRAINING.

(a) Notwithstanding sub. (2) (a) 1. to 2r., and subject to pars. (b) and (c), no school bus driver, employee, or volunteer may administer any of the following nonprescription drug products or prescription drugs unless he or she has received training, approved by the department, in administering these nonprescription drug products and prescription drugs:

1. A nonprescription drug product or prescription drug product that must be injected into a pupil.
2. A nonprescription drug product or prescription drug product that must be inhaled by a pupil.
3. A nonprescription drug product or prescription drug product that must be rectally administered to a pupil.
4. A nonprescription drug product or prescription drug product that must be administered into a nasogastric tube.
5. A nonprescription drug product or prescription drug product that must be administered into a gastrostomy tube.
6. A nonprescription drug product or prescription drug product that must be administered into a jejunostomy tube.

(b) This subsection does not apply to health care professionals.

(c) The training required under par. (a) need not be approved by the department when the training is completed by a school bus driver that transports only pupils enrolled in a private school, an employee of a private school, or a volunteer in or for a private school.

History: 1983 a. 334; 1985 a. 146 s. 8; 1985 a. 218; 1987 a. 14, 399; 1989 a. 56, 102, 105; 1991 a. 103; 1997 a. 164; 1999 a. 56, 126; 2001 a. 16, 83; 2007 a. 130; 2009 a. 160, 302; 2011 a. 86, 260.

118.29 – Administration of drugs to pupils and emergency care:

(1) DEFINITIONS. In this section:

(A) “Administer” means the direct application of a non-prescription drug product or prescription drug, whether by injection, ingestion or other means, to the human body.

(B) “Drug” means any substance recognized as a drug in the official U.S. pharmacopoeia and National formulary or official homeopathic pharmacopoeia of the United States or any supplement to either of them.

(BG) “Drug product” means a specific drug or drugs in a specific dosage form and strength from a known source of manufacture.

(BM) “Epinephrine auto-injector” means a device used for the automatic injection of epinephrine into the human body.

(C) “Health Care Professional” means a person licensed as an emergency medical technician under s.256.15, a person certified as a first responder under s. 256.15 (8) or any person licensed, certified, permitted or registered under chs. 441 or 446 to 449

(D) “High degree of negligence” means criminal negligence, as defined in s. 939.35 (1).

(DM) “Nonprescription drug product” means any non-narcotic drug product which may be sold without a prescription order and which is prepackaged for use by consumers and labeled in accordance with the requirements of state and federal law.

(E) “Practitioner” means any physician, dentist, optometrist, physician assistant, advanced

~~Practice nurse prescriber, or podiatrist licensed in any state.~~
~~(F) "Prescription drug" has the meaning specified in s. 450.01 (20).~~
~~(2) AUTHORITY to administer drugs; CIVIL LIABILITY EXEMPTION.~~
~~(A) Notwithstanding chs. 441, 447, 448, and 450, a school bus operator validly authorized~~
~~Under ss. 343.12 and 343.17 (3) © to operate the school bus he or she is operating, any school~~
~~Employee or volunteer, county children with disabilities education board employee or volunteer~~
~~Or cooperative educational service agency employee or volunteer authorized in writing by a~~
~~Private school administrator or private school principal, and any tribal school employee or~~
~~Volunteer authorized in writing by a tribal school administrator or tribal school principal;~~
~~1.)~~

~~a. Except as provided in subd. 1. b., may administer any nonprescription drug product which~~
~~may lawfully be sold over the counter without a prescription to a pupil in compliance with the~~
~~written instructions of the pupil's parent or guardian if the pupil's parent or guardian consents~~
~~in writing. If the nonprescription drug product is supplied by the pupil's parent or guardian, the~~
~~nonprescription drug product shall be supplied in the original manufacturer's package, and the~~
~~package must list the ingredients and recommended therapeutic dose in a legible format.~~

~~b. May administer a nonprescription drug product to a pupil in a dosage other than the~~
~~recommended therapeutic dose only if the request to do so is accompanied by the written~~
~~approval of the pupil's practitioner.~~

~~2.) May administer a prescription drug to a pupil in compliance with the written instructions~~
~~Of a practitioner if the pupil's parent or guardian consents in writing; the prescription drug is~~
~~Supplied in the original pharmacy labeled package; and the package specifies the name of the~~
~~Pupil, the name of the prescriber, the name of the prescription drug, the dose, the effective~~
~~date and the directions in a legible format.~~

~~2M. Except for epinephrine administered under subd. 2., may use an epinephrine auto-~~
~~Injector to administer epinephrine to any pupil who appears to be experiencing a severe~~
~~Allergic reaction if, as soon as practicable, the school bus operator, employee or volunteer~~
~~Reports the allergic reaction by dialing the telephone number "911" or, in an area in which~~
~~The telephone number "911" is not available, the telephone number for an emergency~~
~~medical service provider.~~

~~2R. Except for glucagon administered under subd. 2., may administer glucagon to any~~
~~Pupil who the school bus driver, employee, or volunteer knows is diabetic and who appears~~
~~To be experiencing a severe low blood sugar event with altered consciousness if, as soon as~~
~~Practicable, the school bus operator, employee, or volunteer reports the event by dialing the~~
~~Telephone number "911" or, in an area in which the telephone number "911" is not available,~~
~~the telephone number for an emergency medical service provider.~~

~~3) EMERGENCY CARE; CIVIL LIABILITY EXEMPTION. Any school bus operator validly~~
~~Authorized under ss. 343.12 and 343.17 (3) (c) to operate the school bus he or she is operating~~
~~And any public, private, or tribal school employee or volunteer, county children with disabilities~~
~~Education board employee or volunteer, or cooperative educational service agency employee~~
~~or volunteer, other than a health care professional, who in good faith renders emergency care~~
~~to a pupil of a public, private, or tribal school is immune from civil liability for his or her acts or~~

~~omissions in rendering such emergency care. The immunity from civil liability provided under this subsection is in addition to and not in lieu of that provided under s. 895.48 (1).~~

~~4) WRITTEN POLICIES. Any school board, county children with disabilities education board, cooperative educational service agency or governing body of a private school whose employees or volunteers may be authorized to administer nonprescription drug products or prescription drugs to pupils under this section shall adopt a written policy governing the administration of nonprescription drug products and prescription drugs to pupils. In developing the policy, the school board, board, agency or governing body shall seek the assistance of one or more school nurses who are employees of the school board, board, agency or governing body or are providing services or consultation under s. 121.02 (1) (g) the policy shall include procedures for obtaining and filing in the school or other appropriate facility the written instructions and consent required under sub. (2) (a) for the periodic review of such written instructions by a registered nurse licensed under s. 441.06 or in a party state, as defined in s. 441.50 (2) (j), for the storing of nonprescription drug products and prescription drugs, and for record keeping, including documenting the administration of each dose, including errors.~~

~~4M. APPLICABILITY TO TRIBAL SCHOOL EMPLOYEES. The immunity under sub. (2) applies to a tribal school employee, administrator, or volunteer only if the governing body of the tribal school has adopted a written policy that complies with sub. (4).~~

~~5) EXEMPTION. No employee except a health care professional may be required to administer a nonprescription drug product or prescription drug to a pupil under this section by any means other than ingestion.~~

~~6) TRAINING.~~

~~6A. Notwithstanding sub. (2) (a) 1. To 2r., and subject to pars. (b) and (c) no school bus driver, employee, or volunteer may administer any of the following nonprescription drug product or prescription drugs unless he or she has received training, approved by the department, in administering these nonprescription drug products and prescription drugs:~~

- ~~1. A nonprescription drug product or prescription drug product that must be injected into a pupil.~~
- ~~2. A nonprescription drug product or prescription drug product that must be inhaled by a pupil.~~
- ~~3. A nonprescription drug product or prescription drug product that must be rectally administered to a pupil.~~
- ~~4. A nonprescription drug product or prescription drug product that must be administered into a nasogastric tube.~~
- ~~5. A nonprescription drug product or prescription drug product that must be administered into a gastrostomy tube.~~
- ~~6. A nonprescription drug product or prescription drug product that must be administered into a jejunostomy tube.~~

~~(b) This subsection does not apply to health care professionals.~~

~~(c) The training required under par. (a) need not be approved by the department~~

~~When the training is completed by a school bus driver that transports only pupils enrolled in a private school, an employee of a private school, or a volunteer in or for a private school.~~

~~History: 1982 a. 334; 1985 a. 218; 1987 a. 14, 299; 1989 a. 56, 102, 105; 1991 a. 103; 1997 a. 164; 1999 a. 56, 126; 2001 a. 16, 83; 2007 a. 130; 2009 a. 160, 302; 2011 a. 86, 260.~~

Prescription Drug Pharmacy Label

