Students – Administrative Procedure

Administering Medicines to Students

I. Definitions:
A. Medication as used in this document, will refer to both prescription and non-prescription drugs.
B. Licensed prescriber as defined in this document:
   1. Physician - A physician licensed to practice medicine in all of its branches including medical doctors and doctors of osteopathy.
   2. Dentist - A person licensed to practice dentistry in all of its branches.
   3. Podiatrist - A person licensed to practice podiatry.
C. Prescription drugs - Drugs requiring a written order for dispensing, signed by a licensed prescriber.
D. Non-prescription drugs - Medication that may be obtained over the counter without a prescription from a licensed prescriber.
E. Long-term medication - Medication utilized for treatment of chronic illnesses, including both daily and PRN (as needed) medication.

II. Medications dispensed in the schools.
All medications dispensed in the schools shall be prescribed by an Illinois licensed prescriber. Students who require medication during the school day shall bring the medication to school following these guidelines.
A. A written order for the medication must be obtained from the student’s licensed prescriber. The order shall include possible side effects and other information recommended by the Illinois Department of Public Health and the Illinois State Board of Education. The written order will be placed in the pupil’s file.
B. Medication must be brought to the school in the original package or appropriately labeled container.
   1. Prescription drugs shall display:
      Student’s name
      Prescription number
      Medication name/dosage
      Date and refill
      Licensed prescriber’s name
      Administration route and/or other directions
      Pharmacy name, address, and phone number
      Name or initials of pharmacist
   2. Non-prescription drugs shall be brought to school and stored with the manufacturer’s label indicating the ingredients and the student’s name affixed to the container.
C. The parent(s)/guardian(s) will be responsible at the end of the treatment regime for removing from the school any unused medication which was prescribed for their child. If the parent(s)/guardian(s) do not pick up the medication by the end of the school year, the school will discard the medication.

III. Student Medical Authorization
A Medication Authorization Form shall be completed annually by the student’s parent or guardian and physician and shall be kept on file at the school building which the child attends.
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IV. Administration by School Personnel
   A. Except for conditions covered by Section V, B, 1 – 4, of this procedure, all school medication shall be left with the school nurse during the school day. If there is no school nurse in the building, then the medication shall be left with the person designated by the Building Principal.
   B. Except for conditions covered by Section V, B, 1 – 4, of this procedure, medications must be stored in a separate locked drawer or cabinet. Medications requiring refrigeration should be refrigerated in a secure area.

V. Administration by Student
   A. A student may self-administer medication with parental consent and the School Medication Authorization Form on file with the Building Principal. The medication shall be stored for the student.
   B. For students with medical conditions requiring that they have the medication (e.g. inhaler for asthmatics, Epi-Pen for allergic reactions, etc.) in their possession for immediate self-administration,
      1. Students should be evaluated on an individual basis by the school’s nurse regarding the need to carry emergency medication,
      2. Parents/legal guardian must provide written authorization for the child to be in possession of the medication and to self-administer,
      3. The physician must certify that there is a medical condition necessitating that the student be in possession of the medication and that the student is capable of self-administration,
      4. The parent must sign a statement indemnifying the district from any liability for the self-administration.
   C. A record shall be kept of all medication stored, specifying the name of the student and name of medication, the time of use, and dosage.

VI. Field Trips. The following instruction shall appear on all parental permission forms required for field trips and outdoor education experiences.

All medication to be administered during this field trip/outdoor education experience shall be clearly marked with the following information:
   Student’s name
   Prescription number
   Medication name/dosage
   Administration route and/or other direction
   Date and refill
   Licensed prescriber’s name
   Pharmacy name, address, and phone number
   Name or initials of pharmacist

If sending over-the-counter medications, the container is to be affixed with the manufacturer’s original label indicating the ingredients and the student’s name.

09/06/05