ADMINISTRATION OF MEDICATION

The Board of Education recognizes that the administration of medication during the school day may be necessary if failure to take such medication would jeopardize the health of the pupil or the pupil would not be able to attend school. The Board shall not be responsible for the diagnosis and treatment of pupil illness.

For purposes of this policy, “medication” means any drug approved by the federal Food and Drug Administration for preventing, caring for and assisting in the cure of disease and injury, and shall include all non-prescription “over-the-counter” drugs and any drug prescribed by a physician for a particular pupil.

Before any medication may be administered to any pupil, the Board of Education requires: 1) a written request from the parent/guardian, and 2) if the pupil requires prescription medication or any non-prescription medication other than acetaminophen or ibuprofen, a written request from the prescribing physician and an original dispensing medication container. For prescription medication, the dispensing medication container must display, a valid pharmacy label. The written request from the parent/guardian shall give permission for such administration and relieve the Board of Education and its employees from liability for administration of medication, and in the case of administration of acetaminophen or ibuprofen, shall further indicate the specific condition for which administration is requested. The written request from the prescribing physician shall include:

A. The name and purpose of the medication;
B. The dosage of medication, including instructions for administration;
C. Name of physician and date,

Both documents shall be kept on file in the office of the school nurse.

The school nurse may refuse to administer non-prescription medication when in the nurse’s professional judgment such administration is contraindicated.

Any permission granted pursuant to this policy shall only be for the duration of the school year in which the permission is granted. The school nurse is responsible for notifying the parents/guardians of the pupil of this limitation every year. Permission must be renewed each school year upon the fulfillment of such conditions as may be required by the District and as set forth herein.

ADOPTION OF REGULATIONS/PROCEDURES

The Director of Health Services and Chief Medical Director shall develop administrative regulations, procedures and forms to implement the provisions of this policy and submit same to the Board for approval.

The regulations and forms shall include and provide for, but need not be limited to, the following:

A. The development and/or review of appropriate Individualized Health Plans, Emergency Health Care Plans, and Asthma Action Plans (collectively “Health Plans”).

B. All medications, whether prescribed or over-the-counter, will only be administered by the Medical Inspector/School Physician, a certificated School Nurse, a non-certificated Registered or Licensed Practical Nurse, a substitute school nurse employed by the District, the student’s parent, the student where approved to self-administer medication pursuant to the terms of applicable statutes, or other District employees appropriately designated and trained by the school nurse when so authorized by statute.
C. The appropriate secure delivery, storage and retrieval of all medications in the school nurse’s office (or in a secured but unlocked location as required to ensure prompt availability in the event of an emergency at school or at a school-sponsored function), and the disposal of all pupil medications at the end of the school year. All medications shall be kept in the original labeled container, except in those instances where pupils have been granted permission to self-medicate (see self-medication). All medications shall be delivered to the school nurse by the parent/guardian and shall be retrieved by the parent/guardian at the end of the period of medication or the school year, whichever is earlier.

D. A requirement that a pupil’s prescribed epinephrine be placed in a secure but unlocked location easily accessible by the school nurse and designees to ensure prompt availability in the event of an allergic emergency at school or at a school-sponsored function. The location of the epinephrine shall be indicated on the pupil’s emergency care plan. Back-up epinephrine shall also be available at the school if needed.

E. A requirement that each school in the District have and maintain at least one nebulizer in the office of the school nurse or a similar accessible, but secure, location.

F. A requirement that 1) each school nurse and/or medical designee shall receive mandated or necessary training relative to the treatment and/or medication of pupils, including but not limited to training in airway management and the use of nebulizers and inhalers consistent with nationally recognized standards; and 2) each student authorized to use asthma medication or a nebulizer shall have an asthma treatment plan prepared by the student’s physician that identifies, at a minimum, asthma triggers, and an individualized health care plan for meeting the medical needs of the student while attending school or a school-sponsored event.

G. Provisions for: a) the school nurse to designate additional District employees who volunteer to administer glucagon to a student with diabetes who is experiencing severe hypoglycemia; b) notification, to each bus driver who transports a pupil with diabetes, of the pupil’s condition, how to treat hypoglycemia, who to contact in an emergency, and parent contact information; and c) posting in plain view in a designated area of each school building a reference sheet identifying signs and symptoms of hypoglycemia in students with diabetes.

H. The maintenance of records by the school nurse which shall include, but not be limited to, the name of the pupil to whom medication may be administered, the prescribing physician, the dosage and timing of medication and a notation of each instance of administration, including each instance where a student reports s/he has self-medicated.

I. When developing regulations pursuant to this provision, all appropriate New Jersey Department of Education and New Jersey Department of Health guidance documents must be consulted. Implementation of this policy shall be in accordance with the appropriate guidance documents, New Jersey statutes and administrative regulations and sound medical judgment.

J. All necessary forms associated with the implementation of this policy.

EMERGENCY ADMINISTRATION OF MEDICATION

Each school nurse is hereby authorized to administer asthma medication through the use of a nebulizer.

The District’s Medical Inspector/School Physician, any certificated School Nurse, non-certificated Registered or Licensed Practical Nurse, or a substitute school nurse employed by the District may administer epinephrine via a pre-filled auto injector mechanism in emergency situations when the pupil is unable to administer his or her own medication, or may administer glucagon to a severely hypoglycemic diabetic pupil. In their absence, an employee of the District who has been properly trained and designated by the school nurse may do so.

Any such designee must be properly trained by the school nurse in the administration of the pre-filled auto injector mechanism using the standardized training protocol designated by the New Jersey Department of Education, or
properly trained in the administration of glucagon, whichever is applicable. Each designee shall receive individual training for each pupil for whom he/she is designated.

The Board shall inform the pupil’s parents/guardians in writing that if the specified procedures are followed, the District, its employees and agents shall have no liability as a result of any injury arising from the administration of epinephrine to the pupil.

The school nurse or designee shall be promptly available on site at the school and school-sponsored functions in the event of an allergic reaction. The pupil shall be transported to a hospital emergency room by emergency services personnel after the administration of epinephrine, even if the pupil’s symptoms appear to have resolved.

In order to permit school personnel to administer epinephrine in an emergency situation, parents/guardians shall provide the Board with the following:

A. Written orders from the physician that the pupil requires the administration of epinephrine for anaphylaxis and may not have the capability for self-administration of the medication should the pupil have a severe allergic reaction;

B. Written permission for the administration of epinephrine via a pre-filled, auto injector mechanism by the school nurse or designee(s);

C. A signed statement acknowledging their understanding that if the specified procedures are followed, the district shall have no liability as a result of any injury arising from the administration of the epinephrine or other medication by the school nurse or designee(s) to the pupil and that the district, its employees and agents shall be indemnified and held harmless against any claims arising out of the administration of emergency medication, including epinephrine, to the pupil.

D. A signed statement acknowledging their understanding that, in the event that administration of emergency dosage of medication does occur, the pupil shall be transported to a hospital emergency room by emergency services personnel even if the pupil’s symptoms appear to have resolved.

Permission for the administration of epinephrine via a pre-filled, auto injector mechanism shall be granted annually and must be renewed each school year upon the fulfillment of the above requirements.

Written authorization for administration of glucagon in emergency circumstances shall be provided to the District by the student’s parents annually and must be renewed each school year.

SELF-MEDICATION

A middle or high school student may self-administer medication, without the supervision of the school nurse, in the case of asthma or other potentially life-threatening illnesses, or diabetes, as approved by the Chief Medical Inspector and school nurse. Life threatening illness means an illness or condition that requires an immediate response to specific symptoms or sequelae that if left untreated may lead to severe physical injury or the potential loss of life.
The following conditions must be met prior to permission being granted to any particular student:

1. **Self-medication for middle and senior high students (excluding diabetic pupils):**
   
   A. the parent/guardian of the pupil must provide the school nurse with written authorization for the self-administration of medication on forms adopted for this purpose;
   
   B. the parent/guardian of the pupil must provide the school nurse with written certification from the pupil’s physician specifying: 1.) the nature of the pupil’s life-threatening illness, including any complications and potentially adverse side effects/symptoms of the condition; 2.) that the pupil must carry emergency medication to treat the condition; and 3.) that the pupil is capable of and has been instructed in the proper method of self-administration of the medication on forms adopted for this purpose from time to time. The permission shall be effective only for the school year in which it is granted and shall be renewed for each subsequent school year upon fulfillment of the requirements of this provision.
   
   C. the parent/guardian of the pupil must sign a statement on the appropriate form acknowledging that the Cherry Hill School District shall incur no liability as a result of any injury arising from the self-administration of medication by the pupil, and the parent/guardian shall indemnify and hold harmless the Cherry Hill School District and its employees or agents against any claims arising out of the self-administration of medication by the pupil.
   
   D. the pupil must report any instances of self-medication to the school nurse which occur on school grounds or off-grounds when the pupil is engaged in any school related event. The school nurse shall make appropriate notation of the information provided by the pupil (and notify the pupil’s parent/guardian/medical provider).

2. **Self-management and care of diabetes:**

   The parent or guardian of a student with diabetes who seeks diabetes care while at school shall inform the school nurse, who shall develop an individualized health care plan and an individualized emergency health care plan for the student, provided that:
   
   A. the parents or guardians of the student annually provide to the school nurse written authorization for the provision of diabetes care as may be outlined in the individualized plans including authorization for the emergency administration of glucagon and, if requested by the student’s parents or guardians, authorization for the student’s self-management and care of his or her diabetes;
   
   B. the student’s physician or advanced practice nurse provides written certification to the school nurse that the student is capable of, and has been instructed in, the management and care of his or her diabetes;
   
   C. the student’s individualized health care plan and individualized emergency health care plan shall be updated by the school nurse prior to the beginning of each school year and as necessary in the event that there is a change in the health status of the student;
   
   D. a pupil who is permitted to self-administer medication for diabetes control or check his/her medical condition via blood glucose testing, shall be allowed to carry the prescribed medication and any necessary supplies to test glucose level or administer the medication at all times, provided that the pupil does not endanger him/herself or others. Guidelines for the appropriate carriage of such supplies and the use of Universal Precautions shall be included in the student’s Health Plans. The possession and use of syringes consistent with the student’s Health Plans shall not be considered a violation of applicable statutory or regulatory provisions that may otherwise restrict or prohibit such possession or use. Permission to self-administer medication may be revoked if the student or parent fails to comply with all conditions of this policy, any procedure implemented by the District, and/or has otherwise violated the tenets of the agreement to self-medicate. The school
nurse shall confer with the Medical Inspector prior to recommending the termination of the pupil’s permission to self-medicate.

3. **Self-medication for elementary school students:**

   Elementary school students are permitted to self-administer medication only under the supervision of the school nurse. Elementary students granted permission to self-administer medication must submit the appropriate forms as identified for middle and senior high students. Permission forms must be reviewed with the Chief Medical Inspector and the Director of Health Services.

4. All students requesting permission to self-administer medication must submit the appropriate forms to the school nurse, and review the procedure they will follow to self-administer the medication as indicated on their Health Plans with the school nurse and the principal or administrator for that school. The nurse will log the date this has been completed.

**Legal References:**

- **N.J.S.A. 18A:11-1** General mandatory powers and duties
- **N.J.S.A. 18A:40-1** Employment of medical inspectors, optometrists and nurses; salaries; terms; rules
- **N.J.S.A. 18A:40-3.2 et seq.** Medical and Nursing Personnel
- **N.J.S.A. 18A:40-4** Examination for physical defects and screening of hearing of pupils
- **N.J.S.A. 18A:40-7** Exclusion of pupils who are ill
- **N.J.S.A. 18A:40-12.3** Self-administration of medication by pupil; conditions through -12.4
- **N.J.S.A. 18A:40-12.5** Policy for emergency administration of epinephrine to public school pupils
- **N.J.S.A. 18A:40-12.6** Administration of epinephrine; primary responsibility; parental consent
- **N.J.S.A. 18A:40-12.7** Nebulizer
- **N.J.S.A. 18A:40-12.8** Administration of asthma medication by school nurse through nebulizer; training; pupil asthma treatment plan
- **N.J.S.A. 18A:40-12.11 et seq.** Care of students with diabetes
- **N.J.S.A. 18A:54-20** Powers of board (county vocational schools)
- **N.J.S.A. 45:11-23** Definitions
- **N.J.A.C. 6A:16-1.1 et seq.** Programs to Support Student Development

See particularly:

- **N.J.A.C. 6A:16-1.3, .4(a), -2.1, -2.2, -2.3, -2.4**

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*Communications Workers of America, Local 1033, On behalf of Karen Norton, Barbara Woolston, Mary Ellen Schoen et al. v. New Jersey State Department of Education, Marie H. Katzenbach School for the Deaf, State Board Docket #52-91


*Protocol and Implementation Plan for the Emergency Administration of Epinephrine by a Delegate Trained by the School Nurse,* New Jersey State Department of Education, October, 1998

*P.L. 2007, c. 57 amends N.J.S.A. 18A:40-12 to encourage recruitment and training of additional school employees to administer epinephrine and the placement of a pupil’s prescribed epinephrine in a secure but unlocked location easily accessible by the school nurse and designees to ensure prompt availability in the*
event of an allergic emergency at school or at a school-sponsored function. Two NJDOE documents give specific ideas and best practices to implement P.L. 2007, c. 57.

A. Training Protocols for the Emergency Administration of Epinephrine (9/08)

B. Guidelines for the Management of Life-Threatening Food Allergies in Schools (9/08)

Related Policy and Procedures:

Procedure A-31 Emergency Administration of Medication
Procedure D-13: Automated External Defibrillators (AEDs)
Procedure M-10: Administration of Medication During school Hours

ORIGINAL POLICY JBCCB ADOPTED: 11/20/89
REVISED TO POLICY 5141.21 11/18/97
Revised: 7/27/99, 11/24/09, 1/26/10