

1Ovando School District #11

2

3STUDENTS

3416

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5Administering Medicines to Students

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7“Medication” means prescribed drugs and medical devices that are controlled by the U.S. Food and
8Drug Administration and are ordered by a healthcare provider. It includes over-the-counter
9medications prescribed through a standing order by the school physician or prescribed by the
10student’s healthcare provider.

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12A building principal or other administrator may authorize, in writing, any school employee:

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14 To assist in self-administration of any drug that may lawfully be sold over the counter
15 without a prescription to a student in compliance with the written instructions and with the
16 written consent of a student’s parent or guardian; and

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18 To assist in self-administration of a prescription drug to a student in compliance with written
19 instructions of a medical practitioner and with the written consent of a student’s parent or
20 guardian.

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22Except in an emergency situation, only a qualified healthcare professional may administer a drug or a
23prescription drug to a student under this policy. Diagnosis and treatment of illness and the
24prescribing of drugs are never the responsibility of a school employee and should not be practiced by
25any school personnel.

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27Administering Medication

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29The Board will permit administration of medication to students in schools in its jurisdiction. A
30school nurse (who has successfully completed specific training in administration of medication),
31pursuant to written authorization of a physician or dentist and that of a parent, an individual who has
32executed a caretaker relative educational authorization affidavit, or guardian, may administer
33medication to any student in the school or may delegate this task pursuant to Montana law.

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35Emergency Administration of Medication

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37In case of an anaphylactic reaction or risk of such reaction, a school nurse or delegate may administer
38emergency oral or injectable medication to any student in need thereof on school grounds, in a school
39building, or at a school function, according to a standing order of a chief medical advisor or a
40student’s private physician.

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42In the absence of a school nurse, an administrator or designated staff member exempt from the nurse
43license requirement under § 37-8-103(1)(c), MCA, who has completed training in administration of
44medication, may give emergency medication to students orally or by injection.

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46The Board requires that there must be on record a medically diagnosed allergic condition that would
47require prompt treatment to protect a student from serious harm or death.

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4A building administrator or school nurse will enter any medication to be administered in an
5emergency on an individual student medication record and will file it in a student’s cumulative health
6folder.

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8Self-Administration of Medication

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10The District will permit students who are able to self-administer specific medication to do so
11provided that:

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13☐ A physician or dentist provides a written order for self-administration of said medication;

14☐ Written authorization for self-administration of medication from a student’s parent, an
15 individual who has executed a caretaker relative educational authorization affidavit, or
16 guardian is on file; and

17☐ A principal and appropriate teachers are informed that a student is self-administering
18 prescribed medication.

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20A building principal or school administrator may authorize, in writing, any employee to assist with
21self-administration of medications, provided that only the following may be employed:

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23☐ Making oral suggestions, prompting, reminding, gesturing, or providing a written guide for
24 self-administering medications;

25☐ Handing to a student a prefilled, labeled medication holder or a labeled unit dose container,
26 syringe, or original marked and labeled container from a pharmacy;

27☐ Opening the lid of a container for a student;

28☐ Guiding the hand of a student to self-administer a medication;

29☐ Holding and assisting a student in drinking fluid to assist in the swallowing of oral
30 medications; and

31☐ Assisting with removal of a medication from a container for a student with a physical
32 disability that prevents independence in the act.

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34Self-Administration or Possession of Asthma, Severe Allergy, or Anaphylaxis Medication

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36Students with allergies or asthma may be authorized by the building principal or Superintendent, in
37consultation with medical personnel, to possess and self-administer emergency medication during the
38school day, during field trips, school-sponsored events, or while on a school bus. The student shall
39be authorized to possess and self-administer medication if the following conditions have been met:

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41☐ A written and signed authorization from the parents, an individual who has executed a
42 caretaker relative educational authorization affidavit, or guardians for self-administration of
43 medication, acknowledging that the District or its employees are not liable for injury that
44 results from the student self-administering the medication.

45☐ The student must have the prior written approval of his/her primary healthcare provider. The
46 written notice from the student’s primary care provider must specify the name and purpose of
47 the medication, the prescribed dosage, frequency with which it may be administered, and the

1 circumstances that may warrant its use.

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5 Documentation that the student has demonstrated to the healthcare practitioner and the school
6 nurse, if available, the skill level necessary to use and administer the medication.

7 Documentation of a doctor-formulated written treatment plan for managing asthma, severe
8 allergies, or anaphylaxis episodes of the student and for medication use by the student during
9 school hours.

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11 Authorization granted to a student to possess and self-administer medication shall be valid for the
12 current school year only and must be renewed annually.

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14 A student’s authorization to possess and self-administer medication may be limited or revoked by the
15 building principal or other administrative personnel.

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17 If provided by the parent, an individual who has executed a caretaker relative educational
18 authorization affidavit, or guardian, and in accordance with documentation provided by the student’s
19 doctor, backup medication must be kept at a student’s school in a predetermined location or locations
20 to which the student has access in the event of an asthma, severe allergy, or anaphylaxis emergency.

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22 Immediately after using epinephrine during school hours, a student shall report to the school nurse or
23 other adult at the school who shall provide follow up care, including making a 9-1-1 emergency call.

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25 Administration of Glucagons

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27 School employees may voluntarily agree to administer glucagons to a student pursuant to § 20-5-412,
28 MCA, only under the following conditions: (1) the employee may administer glucagon to a diabetic
29 student only in an emergency situation; (2) the employee has filed the necessary designation and
30 acceptance documentation with the District, as required by § 20-5-412(2), MCA, and (3) the
31 employee has filed the necessary written documentation of training with the District, as required by §
32 20-5-412(4), MCA.

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34 Handling and Storage of Medications

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36 The Board requires that all medications, including those approved for keeping by students for self-
37 medication, be first delivered by a parent, an individual who has executed a caretaker relative
38 educational authorization affidavit, or other responsible adult to a nurse or employee assisting with
39 self-administration of medication. A nurse or assistant:

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41 Must examine any new medication to ensure it is properly labeled with dates, name of
42 student, medication name, dosage, and physician’s name;

43 Must develop a medication administration plan, if administration is necessary for a student,
44 before any medication is given by school personnel;

45 Must record on the student’s individual medication record the date a medication is
46 delivered and the amount of medication received;

47 Must store medication requiring refrigeration at 36° to 46° F;

48 Must store prescribed medicinal preparations in a securely locked storage compartment; and

1□ Must store controlled substances in a separate compartment, secured and locked at all times.

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5The District will permit only a forty-five-(45)-school-day supply of a medication for a student to be
6stored at a school; and all medications, prescription and nonprescription, will be stored in their
7original containers.

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9The District will limit access to all stored medication to those persons authorized to administer
10medications or to assist in the self-administration of medications. The District requires every school
11to maintain a current list of those persons authorized by delegation from a licensed nurse to
12administer medications.

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14The District may maintain a stock supply of auto-injectable epinephrine to be administered by a
15school nurse or other authorized personnel to any student or nonstudent as needed for actual or
16perceived anaphylaxis. If the district intends to obtain an order for emergency use of epinephrine in
17a school setting or at related activities, the district shall adhere to the requirements stated in 20-5-420,
18Section 2, MCA.

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20Disposal of Medication

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22The District requires school personnel either to return to a parent, an individual who has executed a
23caretaker relative educational authorization affidavit, or guardian or, with permission of the parent,
24an individual who has executed a caretaker relative educational authorization affidavit, or guardian,
25to destroy any unused, discontinued, or obsolete medication. A school nurse, in the presence of a
26witness, will destroy any medicine not repossessed by a parent or guardian within a seven-(7)-day
27period of notification by school authorities.

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29Legal Reference:	§ 20-5-412, MCA	Definition – parent-designated adult administration of glucagons – training
30		administration of glucagons – training
31	§ 20-5-420, MCA	Self-administration or possession of asthma, severe allergy, or anaphylaxis medication
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33	§ 37-8-103(1)(c), MCA	Exemptions – limitations on authority conferred
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35	ARM 24.159.1604	Tasks Which May Be Routinely Assigned to an Unlicensed Person in Any Setting When a Nurse-Patient Relationship Exists
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38Policy History:

39Adopted on: March 10, 2014

40Reviewed on: February 10, 2014

41Revised on: February 10, 2014