

WESTBROOK PUBLIC SCHOOLS

ANNUAL MEDICATION ADMINISTRATION TRAINING MANUAL FOR NON-LICENSED SCHOOL PERSONNEL



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CONFIDENTIALITY AND PRIVACY

Confidentiality is a very important legal concept in the school setting. The Family Educational Rights and Privacy Act (FERPA) is the federal law that protects the privacy interests of students and their educational records. FERPA applies to any educational agency that receives funds from the United States Department of Education (USDOE). Health records maintained by school employees for Pre-Kindergarten through grade 12 students are protected by FERPA. Information regarding student health information should be shared with school personnel only on a “need to know” basis. Health records contain sensitive information and may not be disclosed without parental/guardian permission. Certain student health information may be necessary to share with school personnel who may be assisting with medication administration. However, this information is confidential and should not be shared with other students or school employees. Privacy is a separate legal concept. If a student tells school personnel how they feel about having a chronic health condition, this information should be shared with the school nurse but not disclosed to those who do not have a “need to know”.

BOE ADMINISTRATION OF MEDICATION POLICY

In the absence of a school nurse... only qualified personnel for schools who have been properly trained may administer medications to students as delegated by the school nurse upon approval of the School Medical Advisor and the school nurse may administer medication to any student in the school following the successful completion of specific training in administration of medication and satisfactory completion of the required criminal history check. Qualified personnel for schools means (a) a full-time employee who is a qualified school employee, except that a coach, an athletic trainer, or school paraprofessional need not be a full time employee. Qualified school employee, as defined in C.G.S. 10-212, means a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach or school paraprofessional.

Medications with a cartridge injector may be administered by qualified personnel for schools only to a student with a medically diagnosed allergic condition which may require prompt treatment to protect the student against serious harm or death. Qualified personnel for schools may administer oral, topical, intranasal, or inhalant medication in the absence of a licensed nurse. Investigational drugs or research or study medications may not be administered by qualified personnel for schools. During intramural and interscholastic athletic events, coaches and licensed athletic trainers who has been trained in the general principles of medication administration during intramural and interscholastic events may administer medications pursuant to Section 10-212a-9 may administer medication for select students for whom self-administration plans are not viable options as determined by the school nurse. The medication which may be administered is limited to: (1) inhalant medications prescribed to treat respiratory conditions and (2) medication administered with a cartridge injector for students with a medically diagnosed allergic condition which may require prompt treatment to protect the student against serious harm or death.. In compliance with all applicable state statutes and regulations, parents/guardians may administer medications to their own children on school grounds.

Administration of Routine Medications

Purpose

To ensure safe and accurate administration of routine medications to all children in school, child care or camp settings. The RN consultant or staff Registered Nurse will delegate and supervise the task of medication administration only to those care providers and staff members who have completed the approved Medication Administration Training. Because the administration of medication requires extra staff time and safety considerations, parents should check with their health care provider to see if a dosage schedule can be arranged that does not involve the hours the child is in school or child care setting.

Medication Administration Policy:

The following requirements must be met before administering medications.

- Written Authorization from the Health Care Provider
- Parent Written Authorization
- Medication in the original labeled container
- Proper care and storage of medication
- Documentation of medication administration

Nebulizer medications and emergency injections (Epipen®) require a written health care plan or instructions completed by the RN consultant and/or the child's health care provider. Parents are responsible for providing all medications and supplies to the school/child care program. In most situations, children should not transport medications to and from school/childcare; this includes medication placed in a diaper bag or backpack. Staff may not deviate from the written authorization from the Health Care Provider with prescriptive authority.

Medication Administration Procedure/Administration of Routine Medications in School

Once all requirements are met, the care provider will administer the medications utilizing the 5 Rights of Medication Administration

1. Right Child
2. Right Medication
3. Right Dose
4. Right Time
5. Right Route



Documentation

Any medications routinely administered must be documented on the Medication Log by the person administering the medication. Refer to the "Field Trip Medication Form."

Medication Incidents

A medication incident is any situation that involves any of the following:

- Forgetting to give a dose of medication or giving more than one dose of the medication
- Giving the medication at the wrong time
- Giving the wrong dose
- Giving the wrong medication
- Giving the wrong medication to the wrong child
- Forgetting to document the medication

Medication incidents are documented on a Medication Incident Report and reported to the RN nurse consultant, child's parents, program administrator and health care provider (as appropriate). Medication incidents that involve medication given to the wrong child or an overdose of medication require consult with Poison Control. DO NOT INDUCE VOMITING UNLESS INSTRUCTED BY POISON CONTROL.

POISON CONTROL NUMBER IS: 1-800-222-1222

SAMPLE PRESCRIPTION LABEL

The image shows a sample prescription label for Amoxicillin 500mg capsules. The label is titled "Prescription" and includes the following information:

- Pharmacy name and address:** Local Pharmacy, 123 MAIN STREET, ANYTOWN, USA 11111
- Drug store phone number:** (800) 555-5555
- Doctor's name:** DR. C. JONES
- Today's date:** DATE 06/23/05
- Number used by the drug store to identify this drug for your refills:** NO 0060023-08291
- Person who gets this drug:** JANE SMITH, 456 MAIN STREET ANYTOWN, US 11111
- Instructions about how often and when to take:** TAKE ONE CAPSULE BY MOUTH THREE TIMES DAILY FOR 10 DAYS UNTIL ALL TAKEN
- Name of drug and strength of drug:** AMOXICILLIN 500MG CAPSULES
- Number of refills:** NO REFILLS - DR. AUTHORIZATION REQUIRED
- Use before date:** USE BEFORE 06/23/06

Additional callouts include:

- Pharmacy name and address:** Points to the pharmacy information.
- Number used by the drug store to identify this drug for your refills:** Points to the NO 0060023-08291.
- Person who gets this drug:** Points to the patient name and address.
- Instructions about how often and when to take:** Points to the dosing instructions.
- Name of drug and strength of drug:** Points to the drug name and strength.
- Number of refills:** Points to the NO REFILLS - DR. AUTHORIZATION REQUIRED.
- Use before date:** Points to the USE BEFORE 06/23/06.
- Don't use this drug past this date:** Points to the USE BEFORE 06/23/06.

EPIPEN ADMINISTRATION

Anaphylaxis is a life-threatening allergic reaction that can be fatal within minutes. Anaphylaxis can be a reaction to: food (particularly peanuts, tree nuts, fish, wheat or eggs), stinging insects (such as wasps or bees), medications, latex, exercise and/or even “unknown” causes.

Symptoms of anaphylaxis include:

- Itching and/or hives, particularly in the mouth or throat
- Swelling of the throat, lips, tongue and/or eye area
- Difficulty breathing, swallowing or speaking
- Increased heart rate and/or sense of impending doom
- Abdominal cramps, nausea, vomiting, diarrhea
- Weakness, collapse, paleness, lightheadedness or loss of consciousness

How to Administer an EpiPen:

1. Identify someone to call 911
2. Flip open cap at top of carrier tube
3. Remove EpiPen from carrier tube and remove the blue safety release



4. Form a fist around the unit with the orange tip pointing downward



5. Swing and firmly push orange tip against outer thigh until click is heard (May be given through clothing)



6. Hold in place for 10 seconds.
7. Remove pen from thigh and massage injection site for 10 seconds
8. Place used pen into carrier tube and give to EMS when they arrive

INHALER ADMINISTRATION

Asthma is a disorder that causes the airways of the lungs to swell and narrow, leading to wheezing, shortness of breath, chest tightness, and coughing. Asthma is caused by inflammation in the airways. When an asthma attack occurs, the muscles surrounding the airways become tight and the lining of the air passages swells. This reduces the amount of air that can pass by. In sensitive people, asthma symptoms can be triggered by breathing in allergy-causing substances (called allergens or triggers). Common triggers can include: animals, dust, mold, pollen, exercise, changes in the weather and even stress.

Signs and symptoms:

- Wheezing
- Shortness of breath
- Difficulty exhaling
- Dry, persistent cough
- Tightness in chest
- Feeling of panic
- Sweating

How to administer an inhaler:



- Remove the mouthpiece cover and check the mouthpiece inside and outside to see that it is clean and free of objects. It is important to breathe as slowly as possible before using your inhaler



- Shake the inhaler 4 or 5 times to ensure that any loose objects are removed and that the contents of the inhaler are evenly mixed



- Hold the inhaler upright with your thumb on the base, below the mouthpiece. Breathe out as far as is comfortable



- Place the mouthpiece in your mouth between your teeth and close your lips firmly around it, **do not bite**



- Breathe in through your mouth. Just after starting to breathe in, press firmly down on the top of the canister to release a puff of medicine. Do this while still breathing in **steadily and deeply**



- Hold your breath, take the inhaler from your mouth and your finger from the top of the inhaler. Continue holding your breath a few seconds, or as long as is comfortable



- If you are to take a second puff **keep the inhaler upright** and wait about half a minute before repeating steps 2 to 6
- Afterwards, rinse your mouth with water and spit it out. This may help to stop you getting thrush and being hoarse
- After use always replace the mouthpiece cover to keep out dust. When the mouthpiece cover is fitted correctly it will 'click' into position. If it does not 'click' into place, turn the mouthpiece cover the other way round and try again. Do not use too much force

DIABETIC EMERGENCIES

Diabetes is a metabolic disorder in which the body does not produce insulin. Insulin is a hormone that is needed to convert sugar, starches and other food into energy needed for daily life. If glucose cannot get inside cells, it builds up in the bloodstream. The buildup of glucose in the blood - sometimes referred to as high blood sugar or hyperglycemia (which means "too much glucose in the blood") - is the hallmark of diabetes. Effective diabetes management is needed to prevent the immediate dangers of blood glucose levels that are too high or too low.

Symptoms of hypoglycemia:

Mild/Moderate Symptoms

Shaky
Sleepy
Inability to concentrate
Sweaty
Confused
Pale
Headache

Uncoordinated
Blurry vision
Irritable or nervous
Slurred speech

Severe Symptoms

Inability to swallow
Seizures or convulsions
Loss of consciousness

Symptoms of hyperglycemia:

Mild/Moderate Symptoms

Increased thirst
Blurred vision
Fatigue
Headache
Dry mouth

Severe Symptoms

Fruity-smelling breath
Nausea and vomiting
Shortness of breath
Abdominal pain
Confusion
Coma

How to check Blood Sugar

Blood sugar testing requires the use of a small electronic device called a glucometer. The meter reads the amount of sugar in a small sample of blood, usually from your fingertip, that you place on a disposable test strip. Follow the instructions that come with your glucose meter. In general, here's how the process works:

1. Insert a test strip into your meter.
2. Prick the side of your fingertip with the needle (lancet) provided with your test kit.
3. Gently squeeze or massage your finger until a drop of blood forms.
4. Touch and hold the edge of the test strip to the drop of blood.
5. The meter will display your blood glucose level on a screen after a few seconds.

Hypoglycemia Management (BG <70 mg/dl)

Give 12-16 gms of fast acting carb: Candy, juice, soft drink (not diet) or 3-4 glucose tabs.

Give 1 tube of glucose gel between cheek and gum if symptoms require urgent effect

Check BG in 20 minutes until BG is >70, if not repeat with rapid acting carbs or meal

For severe hypoglycemia (Unable to swallow, seizure activity, or unconsciousness), administer Glucagon 1 mg IM/SQ in thigh or deltoid; Call 911

Hyperglycemia Management (BG >250 mg/dl)

Carbohydrate coverage using insulin pen.

Encourage drinking sugar free beverage, preferably water every 30-60 minutes.

Get physical. Regular exercise is often an effective way to control your blood sugar.

Do not withhold food.

How to Administer Glucagon

Glucagon is available to be given as an injection in an emergency kit, which can only be obtained by prescription by the child's parent/guardian. It is the responsibility of the parent/guardian to provide the school with a glucagon emergency kit(s). **Always call 911 if administering Glucagon.**



Step-by-Step Instructions

Administering Glucagon:



Preparation

- Remove cap from vial (glass bottle) of glucagon dry powder.
- Pull needle cover off syringe.



Administering Glucagon:



Mixing Solution

- Insert needle through rubber stopper on vial of glucagon and inject entire contents of syringe into vial of powder.
- Without removing the syringe, hold syringe and vial in one hand and gently shake until all powder is dissolved and solution is clear.



Administering Glucagon:



Withdrawing Solution

- Inspect. Solution must be clear and colorless.
- Slowly withdraw the amount of solution from the vial into the syringe as specified in the student's Emergency Hypoglycemia Care Plan.
- Check for air bubbles in syringe. Tap any visible air to the top of the syringe and push gently on the plunger until air is removed.

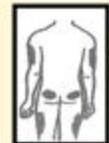
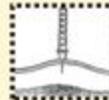


Administering Glucagon:



Injecting Glucagon

- Clean injection site on buttock, upper arm, or thigh with alcohol swab, if available.
- Insert needle at a 90-degree angle and inject glucagon into large muscle (upper arm, thigh or upper outer area of buttock).



Administering Glucagon:



After Injecting

- It may take 10-15 minutes for the student to regain consciousness.
- Vomiting may occur - keep the student positioned on side to prevent choking.
- Remain with student until Emergency Medical Services (EMS) assumes control.

DIASTAT ADMINISTRATION

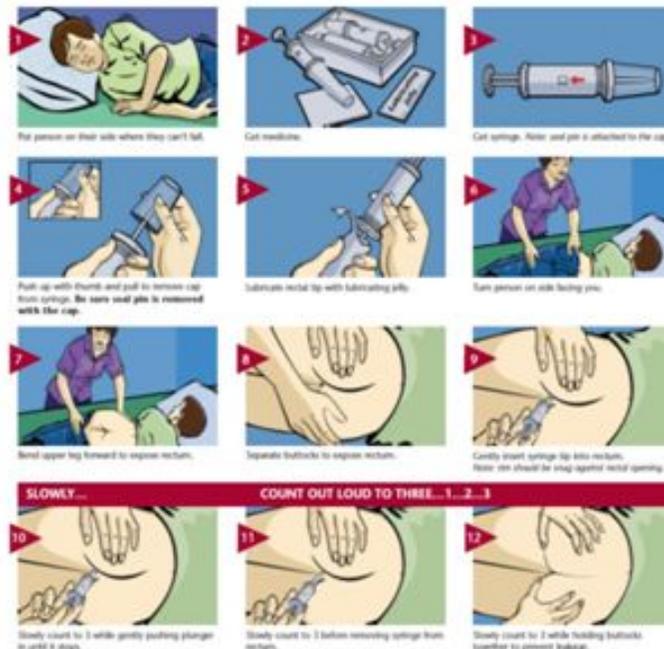
Epilepsy is currently defined as a tendency to have recurrent seizures. A seizure is caused by a sudden burst of excess electrical activity in the brain, causing a temporary disruption in the normal message passing between brain cells. This disruption results in the brain's messages becoming halted or mixed up.

When is a seizure an emergency?

- First time seizure (no medical ID and no known history of seizures);
- Convulsive seizure lasting more than 5 minutes, unless otherwise specified on the student's seizure action plan;
- Repeated seizures without regaining consciousness;
- More seizures than usual or change in type;
- Student is injured, has diabetes or is pregnant;
- Seizure occurs in water; and
- Normal breathing does not resume.

How to Administer Diastat:

1. Identify someone to call 911
2. Position person on their side where they can't fall
3. Get medication/syringe. Note: Seal Pin is attached to the cap
4. Push up with thumb and pull to remove cap from syringe. Be sure Seal Pin is removed with cap
5. Lubricate rectal tip with lubricating Jelly
6. Turn person on side, facing you, and bend upper leg forward to expose rectum
7. Separate buttocks to expose rectum
8. Gently insert syringe tip into rectum (Rim should be snug against rectal opening)
9. Slowly count to 3 while gently pushing plunger in until it stops. Slowly count to 3 before removing syringe from rectum
10. Slowly count to 3 while holding buttocks together to prevent leakage
11. Keep person on side facing you



COMMON MEDICATIONS AND POSSIBLE SIDE EFFECTS

Medication Classification	Common Names	Side Effects
Antibiotics	Amoxicillin, Penicillin, Ceftin, Biaxin, Zithromax	Nausea, diarrhea, rash, yeast infections, fever
Asthma Agents	Albuterol, Flovent, Proventil, ProAir	Nervous feeling, sweating, nausea, vomiting
Pain Relief	Tylenol, Advil/ibuprofen, Excedrin migraine	Stomach upset, tinnitus (ringing in ears), nausea
ADD/ADHS Medication	Adderall, Ritalin, Metadate,	Insomnia, irritability, restlessness, headache
Gastrointestinal Medication	Tums, Tagament, Pepcid, Zantac	Constipation, bloating, dizziness, diarrhea
Anxiety/Depression	Zoloft, Paxil, Hyoscamine, Hydroxyzine	Weight gain, insomnia, nervous feeling, sedation



FIELD TRIP MEDICATION FORM

STUDENT NAME:	DATE:
TEACHER:	GRADE:
PHYSICIAN:	PARENT PHONE:
MEDICATION:	DOSAGE:
ROUTE:	TIME:

POTENTIAL SIDE EFFECTS:

POISON CONTROL NUMBER: 1-800-222-1222

STAFF MEMBER GIVING MEDICATION:

PRINTED NAME: _____

SIGNATURE: _____

MEDICATION ADMINISTRATION:

DATE:	TIME:	DOSE:
SIGNATURE	COMMENTS:	

THIS IS CONFIDENTIAL INFORMATION. PLEASE RETURN TO HEALTH OFFICE AFTER FIELD TRIP.

NURSE SIGNATURE:

NURSE PHONE: (860)399-2010/(860)399-6214

Name: _____ Date: _____

TRUE OR FALSE

1. Medication administration at school requires a parent/guardian written request.
T F
2. An inhaler does not need to be shaken prior to each use.
T F
3. The auto-injector pen may be administered through clothing.
T F
4. Any school personnel may dispense prescription medication.
T F
5. If a student runs out of medication, it is okay to use another student's medication until the parent brings in another supply.
T F
6. A blood sugar reading of less than 70 mg/dl is considered hypoglycemia and needs to be treated immediately.
T F

MUTIPLE CHOICE

- 1) The record of medication administration includes:
 - a) Name of student
 - b) Date
 - c) Time
 - d) All of the above
- 2) A seizure is considered an emergency when:
 - a) Any seizure activity is an emergency
 - b) It occurs in a school
 - c) A convulsive seizure lasts more than 5 minutes
 - d) All of the above
- 3) Administration of the auto-injector medication in emergencies includes:
 - a) Pull off safety cap
 - b) Hold in place for 10 seconds
 - c) Inject into outer thigh
 - d) All of the above
- 4) Which of the following is NOT one of the five rights of administering medication:
 - a) Right Time
 - b) Right Pharmacy
 - c) Right Dose
 - d) Right Student
- 5) Documentation of medication administration includes:
 - a) Student name
 - b) Medication administered
 - c) Signature of administering staff member
 - d) All of the above

List 3 common symptoms of anaphylaxis:

- 1) _____
- 2) _____
- 3) _____

List 3 symptoms of hypoglycemia:

- 1) _____
- 2) _____
- 3) _____

List 3 common side effects of medication:

- 1) _____
- 2) _____
- 3) _____

LIST 2 emergency medications:

- 1) _____
- 2) _____

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Prescriptions



**"I've been taking this medication for 50 years
and I'm going to sue! The side effects
made me wrinkled, fat and bald!"**