

*NOTE: While Colorado school districts are not required by law to adopt a regulation on this subject, this regulation reflects legal requirements school districts must follow. This sample regulation contains the content/language that CASB believes best meets the intent of the law. However, the district should consult with its own legal counsel to determine appropriate procedures that meet local circumstances and needs.*

### **Administering Medications to Students**

If under exceptional circumstances a student is required to take medication during school hours, only the school nurse or the nurse's designee may administer the medication to the student in compliance with the following regulation. In the alternative, the parent/guardian may come to school to administer the medication.

1. All directives of the accompanying policy shall be followed.
2. Written orders from the student's health care practitioner with prescriptive authority under Colorado law shall be on file in the school stating:
  - a. Student's name
  - b. Name of medication
  - c. Dosage
  - d. Purpose of the medication
  - e. Time of day medication is to be given
  - f. Anticipated number of days it needs to be given at school
  - g. Possible side effects
3. The medication shall be brought to school in a container appropriately labeled by the pharmacy or health care practitioner.
4. An individual record shall be kept of medications administered by school personnel.
5. Medication shall be stored in a clean, locked cabinet or container. Emergency medications (such as epinephrine) shall be inaccessible to students, but immediately available to trained school personnel and not in a locked cabinet.

Unless these requirements are met, medication will not be administered to students at school.

### **Self-administration of medication for asthma, allergies or anaphylaxis**

A school shall permit a student to possess and self-administer medication, such as an inhaler or epinephrine, if all of the following conditions are met:

1. Written authorization signed by the student's health care practitioner must be on file with the school which shall include the student's name; the name, purpose, prescribed dosage, frequency, and length of time between dosages of the medication(s) to be self-administered; and confirmation that the student has been instructed and is capable of self-administration of the medication.
2. The school nurse or school administrator, in consultation with the school nurse, the student's health care practitioner, and the student's parent/guardian collaborate to make an assessment of the student's knowledge of his or her condition and ability to self-administer medication.
3. A written statement signed by the student's parent/guardian must be on file with the school, which shall include permission for the student to self-administer his/her medication and a release from liability for any injury arising from the student's self-administration of such medication.
4. A written contract between the school nurse, school administrator, the student, and the student's parent/guardian must be on file with the school, assigning levels of responsibility to the student's parent/guardian, student, and school employees.

A treatment plan authorizing a student to possess and self-administer medication for asthma or anaphylaxis shall be effective only for the school year in which it is approved.

A student shall report to the school nurse or designee or to some adult at the school immediately after the student uses an epinephrine auto-injector during school hours. Upon receiving such report from a student, the school nurse, designee, or other adult will provide appropriate follow-up care to the student, which shall include making a 911 emergency call.

(Approval date)

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