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Administration of Prescription and Nonprescription Medication to Students

- (1) As used in this rule, definitions of terms shall be as follows: (a) "Age appropriate guidelines" means the student must be able to demonstrate the ability, developmentally and behaviorally, to self medicate with permission from a parent or guardian, building administrator and in the case of a prescription medication a physician;
- (ba) "Adrenal crisis" means adrenal crisis as defined in ORS 433.800;
- (eb) "Adrenal insufficiency" means adrenal insufficiency as defined in ORS 433.800;
- (dc) "Asthma" means a chronic inflammatory disorder of the airways that requires ongoing medical intervention;
- (ed) "Designated staffpersonnel" means the school staff personpersonnel who is designated by the building level school administrator, either the principal or head teacher, to administer nonprescription or prescription medication pursuant to district policy and procedure;
- f) "Instruction from physician, physician assistant or nurse practitioner" means a written instruction for the administration of a prescription medication to a student whi(A) Shall include:
- (i) Name of student;
- (ii) Name of medication;
- (iii) Dosage;
- (iv) Method of administration;
- (v) Frequency of administration; and
- (vi) Other special instruction, if any.(B) Shall include the prescription medication label prepared by a pharmacist at the direction of a physician, physician assistant or nurse practitioner will meet the requirements for a written instruction if it contains the information listed in (i) through (vi) of this paragraph;(g) "Instruction from the student's parent or guardian" means a written instruction for the administration of a nonprescription medication to a student which shall include:(A) Name of student;
- (B) Name of medication;

- (C) Dosage;
- (D) Method of administration;
- (E) Frequency of administration;
- (F) Other special instructions; and
- (G) Signature of parent or guardian.
- (e) "Medication" means any drug, chemical compound, suspension or preparation in suitable form for use as a curative or remedial substance taken either internally or externally but not injected except for premeasured doses of epinephrine, medication to treat adrenal insufficiency, and glucagon to treat severe hypoglycemia;
- (hf) "Nonprescription medication" means only Federal Drug Administration approved, non-alcohol-based medication to be taken at school that is necessary for the child to remain in school. This shall be limited to eyes, nose and cough drops, cough suppressants, analgesics, decongestants, antihistamines, topical antibiotics, anti-inflammatories and antacids that do not require written or oral instructions from a physician. Nonprescription medication does not include dietary food supplements or nonprescription sunscreen that under federal law does not require a prescription from a prescriber;
- (ig) "Notice of a diagnoses of adrenal insufficiency" means written notice to the school district from the parent or guardian of a student who has been diagnosed as adrenal insufficient with a copy of an order from the student's physician that includes the student's diagnosis, description of symptoms indicating the student is in crisis, prescription for medication to treat adrenal insufficiency crisis, and instructions for follow-up care after medication to treat adrenal insufficiency crisis has been administered.
- (jh) "Physician Prescriber" means:
- (A) A doctor of medicine or osteopathy or a physician assistant licensed to practice by the Board of Medical Examiners for the State of Oregon except as allowed under subsection (5) of this rule;
- (B) A nurse practitioner with prescriptive authority licensed by the Oregon State Board of Nursing;
- (C) A dentist licensed by the Board of Dentistry for the State of Oregon;
- (D) An optometrist licensed by the Board of Optometry for the State of Oregon; or

- (E) A naturopathic physician licensed by the Board of Naturopathy for the State of Oregon;
- (ki) "Prescription medication" means: any medication that under federal law requires a prescription by a prescriber; (A) Any non-injectable drug, chemical compound, suspension or preparation in suitable form for use as a curative or remedial substance taken either internally or externally by a student under the written direction of a physician; and
- (B) Bronchodilators or auto injectable epinephrine prescribed by a student's Oregon licensed health care professional for asthma or severe allergies.
- (C) Prescription medication does not include dietary food supplements.
- (I) "Qualified trainer" means a person who is familiar with the delivery of health services in a school setting and who is:
- (A) A Registered Nurse licensed by the Oregon State Board of Nursing;
- (B) A physician; or
- (C) A pharmacist licensed by the State Board of Pharmacy for the State of Oregon.
- (mi) "Severe allergy" means a life-threatening hypersensitivity to a specific substance such as food, pollen, or insect sting.
- (n) "Student self-medication" means students must be able to administer medication to him or herself without requiring a trained school staff member to assist in the administration of the medication;
- (o) "Training" means yearly instruction provided by qualified trainers to designated school staff on the administration of prescription and nonprescription medications, based on requirements set out in guidelines approved by the Department of Education, including discussion of applicable district policies, procedures and materials;
- (2) Each school district shall adopt policies and procedures that provide for:
- (a) The administration of prescription and nonprescription medication to students by trained school personnel; and
- (b) The administration of medication by a student to themself without assistance from trained school personnel Student self-medication including age appropriate guidelines.
- (3) Policies and procedures <u>for the administration of medication to students by trained school personnel</u> shall:

- (a) Include a process to designate, train and supervise appropriate school personnel staff that takes into account when a student is in school, at a school sponsored activity, under the supervision of school personnel, in before-school or after-school care programs on school-owned property, and in transit to or from school or school-sponsored activities;
 - (b) Require designated personnel to successfully complete annual training on the administration of medication.
 - (A) Training for designated personnel must be provided by a person who is familiar with the delivery of health services in a school setting and who is:
 - (i) A Registered Nurse licensed by the Oregon State Board of Nursing;
 - (ii) A doctor of medicine or osteopathy or a physician assistant licensed to practice by the Board of Medical Examiners for the State of Oregon; or
 - (iii) A pharmacist licensed by the Board of Pharmacy for the State of Oregon.
 - (B) The training for designated personnelmust be based on requirements set out in guidelines that are approved by the Department of Education and include a discussion of applicable district policies, procedures and materials;
 - (C) The first annual training for a designated personnel and every third annual training thereafter must be provided in-person. During the intervening years, designated personnel may complete an online training that has been approved by the Oregon Department of Education so long as a qualified trainer is available within a reasonable time following the training to answer questions and provide clarification.
 - (bc) Permit designated staff-personnel to administer prescription medication where:under the written permission from the student's parent or guardian and instruction from a physician, physician assistant or nurse practitioner if, because of its prescribed frequency, the medication must be given while in school, at a school sponsored activity, while under the supervision of school personnel, in before school or after school care programs on school owned property, and in transit to or from school or school-sponsored activities;
 - (A) because of its prescribed frequency or schedule, the medication must be given while in school, at a school sponsored activity, while under the supervision of school personnel, in before-school or after-school care programs on school-owned property, and in transit to or from school or school-sponsored activities;
 - (B) The student's parent or guardian has provided written permission; and
 - (C) The student's parent or guardian has provided the school district with written instruction for the administration of the medication from the prescriber that includes the name of the student,

name of the medication, dosage, method of administration, frequency of administration, any other special instructions, and the signature of the prescriber. A prescription medication label prepared by a pharmacist at the direction of a prescriber shall be sufficient if all of the information required by this definition except for the prescriber's signature is included

- (<u>ed</u>) Permit designated <u>staff_personnel</u> to administer nonprescription medication <u>under the</u> <u>written permission and instruction from the student's parent or guardian; and where:</u>
- (A) The nonprescription medication is necessary for the student to remain in school;
- (B) The nonprescription medication is provided in the original manufacturer's container by the parent or guardian of the student;
- (C) The student's parent or guardian has provided written instruction for the administration of the nonprescription medication that includes the name of the student, name of the medication, dosage, method of administration, frequency of administration, any other special instructions, and signature of the student's parent or guardian. If the written instruction is not consistent with the manufacturer's guidelines for the nonprescription medication, the written instruction must also include a written order allowing the inconsistent administration signed by a prescriber; and
- (D) For nonprescription medication that is not approved by the Federal Drug Administration, a written order from the student's prescriber that includes the name of the student, name of the medication, dosage, method of administration, frequency of administration, any other special instructions, and the signature of the prescriber.

(d) Permit student self-medication;

- (e) Include procedures for the administration of premeasured doses of epinephrine by school personnel trained as provided by ORS 433.815 to any student or other individual on school premises who the personnel believe in good faith is experiencing a severe allergic reaction, regardless of whether the student or individual has a prescription for epinephrine;
- (f) Include procedures for the administration of medication by school personnel to treat a student who the personnel believe in good faith is experiencing symptoms of adrenal crisis. The procedures must provide that:
- (A) Only upon notice of a diagnoses of adrenal insufficiency as defined in this rule, the building administrator of the school the student attends will designate <u>one or more</u> school <u>personnel</u> personnel to be responsible for administering medication to treat adrenal insufficiency in the event the student exhibits symptoms that school personnel believe in good faith indicate the student is experiencing symptoms of adrenal crisis;

- (B) The designated school personnel will successfully complete training to administer medication to treat a student who has adrenal insufficiency and it is experiencing symptoms of adrenal crisis in accordance with rules adopted by the Oregon Health Authority;
- (C) The parent or guardian of the student must provide adequate supply of the student's prescribed medication to the school district; and
- (D) In the event that a student experiences symptoms of adrenal crisis and the designated personnel determines the medication to treat adrenal insufficiency should be administered, any available school personnel will immediately call 911 and the student's parent or guardian.
- (g) Provide guidelines for the management of students with life-threatening food allergies and adrenal insufficiency while the student is in school, at a school sponsored activity, while under the supervision of school personnel, in before-school or after-school care programs on school-owned property, and in transit to or from school or school-sponsored activities. The guidelines must include:
- (A) Standards for the education and training of school personnel to manage students with life threatening allergies or adrenal insufficiency;
- (B) Procedures for responding to life-threatening allergic reactions or adrenal crisis;
- (C) A process for the development of an individualized health care and allergy plan for every student with a known life-threatening allergy and an individualized health care plan for every student for whom the school district has been given proper notice of a diagnoses of adrenal insufficiency as defined in this rule;
- (D) Protocols for preventing exposures to allergens;
- (E) A process for determining <u>if or</u> when a student may self-carry prescription medication <u>when</u> <u>the student has not been approved to self-medicate</u>;
- <u>(F) Policies and procedures that provide for self-administration of medication by kindergarten through grade 12 students with asthma or severe allergies. The policies and procedures must:</u>
- (i) Require that a physician prescribe the medication to be used by the student while in school, at a school sponsored activity, while under the supervision of school personnel, in before-school or after school care programs on school owned property, and in transit to or from school or school sponsored activities, and instruct the student in the correct and responsible use of the medication;
- (ii) Require that a physician or other Oregon licensed health care professional, acting within the scope of the person's license; formulate a written treatment plan for managing the student's asthma or severe allergy;

- (4h) Policies and procedures related to administration of prescription and nonprescription medication and student self-medication must discuss Address the following:
- (aA) Safe storage, methods for administration, handling, monitoring supply and disposing of medications;
- (bB) <u>Transcribing</u>, <u>Rrecord</u> keeping and reporting of medication administration, including errors in administration;
- (C) The role of designated school personnel to monitor student responses to medication;
- (<u>eD</u>) Emergency medical response for life threatening side effects and allergic reactions, including the administration of premeasured doses of epinephrine to students and other individuals; and
- (dE) Student confidentiality.
- (4) Policies and procedures for the administration of medication by a student to themself without assistance from trained school personnel shall:
- (a) Permit a student to administer prescription medication to themself where the-student is able to demonstrate the ability, developmentally and behaviorally, to self-medicate and has permission to self-medicate from a parent or guardian, a school building administrator, and a physician or registered nurse practicing in a school setting.
- (b) Permit a student to administer non-prescription medication to themself where the student is able to demonstrate the ability, developmentally and behaviorally, to self-medicate and the student has permission to self-medicate from a parent or guardian and building administrator;
- (c) Include policies and procedures for the self-administration of medication by kindergarten through grade 12 students with asthma or severe allergies that comply with ORS 339.866;
- (d) Address the following:
- (A) Safe storage, methods for administration, handling, and disposing of medications;
- (B) Record keeping and reporting of medication administration, including errors in administration;
- (C) Whether student response to medication should be monitored by designated school personnel and the role of designated school personnel in such monitoring;
- (D) Emergency medical response for life threatening side effects and allergic reactions, including the administration of premeasured doses of epinephrine; and

(E) Student confidentiality.

(5) A registered nurse who is employed by a public or private school or by an education service district or a local public health authority as defined in ORS 431.003 to provide nursing services at a public or private school may accept an order from a physician licensed to practice medicine or osteopathy in another state or territory of the United States if the order is related to the care or treatment of a student who has been enrolled at the school for not more than 90 days.

Stat. Auth.: ORS 326.051

Stats. Implemented: ORS 339.870; 2015 OL Ch. 112, Section 2 (Enrolled HB 3149); 2015 OL 162, Section 1 (Enrolled HB 3041); ORS 678.038

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