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## **PROCEDURE FOR ADMINISTRATION OF MEDICATION DURING SCHOOL HOURS**

Education Code 49423 makes it possible for the school nurse or other designated school personnel, to assist students with medication when certain requirements are met.

Prescribing medication for any student is the responsibility of the student's health care provider. Teachers, administrators, counselors, psychologists, health clerks or any other employee dealing with parents should in no way attempt to diagnose, suggest treatment, medication or specific diagnostic procedures. No employees other than the school nurse/nurse practitioner should discuss with parents the need for medication or treatment for their child.

**PRESCRIPTION OR OVER-THE-COUNTER MEDICATIONS WILL ONLY BE ADMINISTERED BY THE SCHOOL NURSE OR DESIGNATED SCHOOL PERSONNEL WHEN THE FOLLOWING STEPS HAVE BEEN COMPLETED:**

1. Health Care Provider and parent/guardian have fully completed the appropriate sections of the "*Administration of Medication During School Hours*" form.
2. The prescription medication in the original container with the prescription label has been brought. (Ask the parent to request an extra prescription container from the pharmacy for use at school to insure that the medication is properly labeled and is what the health care provider prescribed).
3. The over-the-counter medication has been brought in the original container with the student's name on a label taped over the store label.
4. Complete the upper portion of the "*Medication Record*" and attach it to the "*Administration of Medication during School Hours*" form.
5. Each time the student receives medication, the person giving the medication must write the time and his/her initials in the appropriate box on the medication form.
6. Medication must be kept under lock and key or when indicated, in health office refrigerator.
7. The individuals who are to assist with medication in the nurse's absence should be designated by the principal and instructed by the nurse. These persons should be careful, reliable and cognizant of their responsibility. Training and monitoring is conducted routinely by the site nurse.
8. A schedule of students receiving medication (with names and times) should be posted near the working station of the person responsible, being careful to maintain confidentiality.

**PROCEDURE FOR ADMINISTRATION OF MEDICATION DURING SCHOOL HOURS**  
**(cont'd)**

9. When administering medication:
  1. Check bottle against Administration of Medication Order receiving; make certain name and dosage of medicine agrees with listed drug.
  2. Check with student: "Tell me your name..." Make certain student takes medicine in presence of person dispensing.
  3. Record time and initials in appropriate box on medication form.
10. Be aware of any considerations as to food and drink with medication. Is it to be given before, after, or with meals? Are certain foods to be avoided, such as milk? Check prescription bottle for labels.
11. Be aware of possible side/adverse effects.
12. Document refusal to take medication, or only partial dosage taken on "Medication Record". Notify parent when student refuses if indicated.
13. School nurse may prepare medication when there is no trained office staff or health clerk available, or at the request of office staff, by placing daily dosage in an envelope and labeling it as to name, date, medication, dose, time, and route. A person who gives medication will sign it off on medication sheet.
14. Students anaphylactic kits will be treated as a medication. In event of field trips, the kit may be taken along with parent and/or designated, trained school personnel.
15. Students requiring medication, leaving school premises (asthma, diabetics) may have their medication accompany them. A designated, trained person/parent may supervise medication administration.

## **PROCEDURE FOR MEDICATION/TREATMENT ERROR**

With a medication or treatment error, the following will be observed:

1. Assess student status for any adverse/allergic/anaphylactic reaction. If severe, call 911.
2. Report error to student's healthcare provider and parent. If he/she cannot be reached, contact the district clinic emergency line (626-396-3600 ext. 88180) for physician advice.
3. Observe the student following the healthcare provider's directive. Continue monitoring student's vital signs.
4. Notify site administrator.
5. Notify Health Programs Office (626-396-3600 ext. 88240).
6. Complete a District Incident Report. File with the Health Programs Office within 24 hours of incident. File a copy in the school site health office confidential file.



PASADENA UNIFIED SCHOOL DISTRICT  
EDUCATION CENTER HEALTH PROGRAMS

School \_\_\_\_\_

Date \_\_\_\_\_

To Parent/Guardian:

To protect all children and to conform with the State Education Code, no student may bring any medication (prescription or non-prescription) to school. **Only medication prescribed by a health care provider may be taken during school hours.**

If your son/daughter needs medication, either for a few days or over an extended period of time, and it must be given during school hours, please request an "Administration of Medication During School Hours" form from the school health office. Please request that your physician/health care provider write directions on the form. Please sign and date the lower portion of the form.

Medications must be delivered by the parent or guardian to the school nurse in the original labeled prescription bottle, together with the Medication form signed by the health care provider and parent/guardian.

Only under these conditions may any medicine be given at school.

Thank you for your cooperation!

Sincerely,

Ann Rector  
Director of Health Programs

APPROVED:

Dr. Shawn Bird  
Chief Academic Officer

*351 South Hudson Ave., Pasadena, CA 91101*  
*626-396-3600 ext. 88240*  
*Fax: 626-794-1868*  
[www.pusd.us](http://www.pusd.us)



PASADENA UNIFIED SCHOOL DISTRICT  
EDUCATION CENTER • HEALTH PROGRAMS

Escuela \_\_\_\_\_

Fecha \_\_\_\_\_

A los Padres/Tutores:

Para proteger a todos los niños y estar en conformidad con el Código de Educación del Estado, ningún estudiante puede traer medicina alguna a la escuela (recetada o no recetada). **Únicamente medicina recetada por un proveedor médico se puede tomar durante las horas de escuela.**

Si su hijo, hija necesita medicina ya sea por unos cuantos días o por un largo período de tiempo y se deben dar durante las horas de clases, por favor pida a la oficina de salud de la escuela la forma "Administración de Medicamento Durante Las Horas de Clases" y llévela a su médico o proveedor de cuidado médico para que escriba las instrucciones en la forma.

Las medicinas deben de ser entregadas a la enfermera de la escuela por un padre/tutor en la botella o envase original con la etiqueta de la receta.

Únicamente bajo estas condiciones se puede dar cualquier medicina en la escuela.

Sinceramente,

Ann Rector  
Coordinador de los Programas de Salud

APROBADO:

Dr. Shawn Bird  
Chief Academic Officer

**PASADENA UNIFIED SCHOOL DISTRICT  
HEALTH PROGRAMS**

**ADMINISTRATION OF MEDICATION DURING SCHOOL HOURS**

Name of Student \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_ Home Phone \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_ Teacher \_\_\_\_\_

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**THIS SECTION TO BE COMPLETED BY HEALTH CARE PROVIDER**

**TO THE HEALTH CARE PROVIDER:** Please complete and sign the center section of this form when prescription or non-prescription medication must be given during school hours. This form is required by Section 11753.1, California Education Code, to authorize school personnel to assist the students with the administration of medication.

Date \_\_\_\_\_

Diagnosis or reason for medication:

Medication prescribed, strength, dosage, time to be taken:

Any special instruction, precautions, or possible side effects:

How long will this medication be necessary?

Signature of Health Care Provider \_\_\_\_\_ Phone \_\_\_\_\_

Printed Name of Health Care Provider \_\_\_\_\_

Address \_\_\_\_\_

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**THIS SECTION TO BE COMPLETED BY PARENT/GUARDIAN**

**TO THE PARENT OR GUARDIAN:** The medication must be delivered to the school in the original pharmacy container. Middle school and senior high school students may bring their medication to the health office. The parent or guardian must bring medication for grade-school aged students.

**PLEASE SIGN THE FOLLOWING STATEMENT:** I request that the school assist my child, in taking the medication as directed above, and in accordance with the school policy.

Signature of parent or guardian \_\_\_\_\_ Date \_\_\_\_\_

**DISTRITO ESCOLAR UNIFICADO DE PASADENA  
PROGRAMAS DE SALUD**

**ADMINISTRACIÓN DE MEDICAMENTO DURANTE LAS HORAS DE CLASES**

Nombre del Alumno \_\_\_\_\_ Fecha de Nacimiento \_\_\_\_\_

Domicilio \_\_\_\_\_ No. de Teléfono del Hogar \_\_\_\_\_

Escuela \_\_\_\_\_ Grado \_\_\_\_\_ Maestro/a \_\_\_\_\_

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**ESTA SECCION ES PARA QUE LA COMPLETE EL PROVEEDOR DE CUIDADO DE SALUD**

**TO THE HEALTH CARE PROVIDER:** Please complete and sign the center section of this form when prescription or non-prescription medication must be given during school hours. This form is required by Section 11753.1, California Education Code, to authorize school personnel to assist the students with the administration of medication.

Date \_\_\_\_\_

Diagnosis or reason for medication:

Medication prescribed, strength, dosage, time to be taken:

Any special instruction, precautions, or possible side effects:

How long will this medication be necessary?

Signature of Health Care Provider \_\_\_\_\_ Phone \_\_\_\_\_

Printed Name of Health Care Provider \_\_\_\_\_

Address \_\_\_\_\_

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**ESTA SECCIÓN ES PARA QUE LA COMPLETE EL PADRE O TUTOR**

**AL PADRE O TUTOR:** El medicamento debe ser entregado a la escuela en el envase original de la botica. Los estudiantes de las escuelas intermedias y secundarias pueden traer su medicamento a la oficina de salud. El padre o tutor de los alumnos de la escuela elemental deben de llevar el medicamento a la escuela.

**POR FAVOR FIRMEN LA SIGUIENTE DECLARACIÓN:** Pido que la escuela ayude a mi hijo/a para que se tome la medicina como es indicado arriba y de acuerdo con las reglas de la escuela.

Firma del Padre o Tutor \_\_\_\_\_ Fecha \_\_\_\_\_



## MEDICATION RECORD

NAME \_\_\_\_\_ DOB \_\_\_\_\_ GRADE \_\_\_\_\_ SCHOOL \_\_\_\_\_

MEDICATION \_\_\_\_\_ DOSE \_\_\_\_\_ TIME \_\_\_\_\_

MEDICATION RECEIVED \_\_\_\_\_ DIAGNOSIS \_\_\_\_\_

PHYSICIAN \_\_\_\_\_ TEACHER \_\_\_\_\_

<b>AUG</b>	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
<b>SEP</b>	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	17	18	19	20	21	22	23	24	25	26	27	28	29	30		
<b>OCT</b>	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
<b>NOV</b>	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	17	18	19	20	21	22	23	24	25	26	27	28	29	30		
<b>DEC</b>	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
<b>JAN</b>	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
<b>FEB</b>	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	17	18	19	20	21	22	23	24	25	26	27	28	29			
<b>MAR</b>	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
<b>APR</b>	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	17	18	19	20	21	22	23	24	25	26	27	28	29	30		
<b>MAY</b>	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
<b>JUN</b>	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	17	18	19	20	21	22	23	24	25	26	27	28	29	30		

NURSE \_\_\_\_\_ INITIALS \_\_\_\_\_

HEALTH CLERK \_\_\_\_\_ INITIALS \_\_\_\_\_

OTHER \_\_\_\_\_ INITIALS \_\_\_\_\_

**MEDICATION RECORD**

NAME \_\_\_\_\_ DOB \_\_\_\_\_ GRADE \_\_\_\_\_ SCHOOL \_\_\_\_\_

MEDICATION \_\_\_\_\_ DOSE \_\_\_\_\_ TIME \_\_\_\_\_

MEDICATION RECEIVED \_\_\_\_\_ DIAGNOSIS \_\_\_\_\_

PHYSICIAN \_\_\_\_\_ TEACHER \_\_\_\_\_

JULY	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	

NURSE \_\_\_\_\_

INITIALS \_\_\_\_\_

HEALTH CLERK \_\_\_\_\_

INITIALS \_\_\_\_\_

OTHER \_\_\_\_\_

INITIALS \_\_\_\_\_

**PASADENA UNIFIED SCHOOL DISTRICT**  
**Health Programs**

**Medication Administration Training for Unlicensed Assistive Personnel**

School: \_\_\_\_\_ Year: \_\_\_\_\_

School Nurse: \_\_\_\_\_

**Basics of Medication Administration: The Five Rights**

When administering medication, always check the FIVE RIGHTS. These are:

- A. The Right Person (Patient)
- B. The Right Route
- C. The Right Dose
- D. The Right Time/Frequency
- E. The Right Drug

**A. The Right Person (Patient)**

A common medication error is giving a medication to the wrong person. When the health office is full of students, some of whom are familiar, it is tempting to cut corners and distribute the medication quickly. However, this is when errors are most likely to occur. *Always* ask the student's full name, first and last, or identification number if needed. Check their name against the bottle or container. Check it once more against the individual medication packet. Lastly, check it against the directions provided by the school nurse. Checking three times may seem redundant, but it is a vital safeguard against error.

**B. The Right Route**

Medication can be given by a variety of routes including oral, rectal, intramuscular, intradermal, intravenous, subcutaneous, sublingual, eye drops, ear drops, and intranasal. Therefore, it is crucial that you are certain by what route the medication is to be given. If in doubt, check the directions written by the school nurse.

**C. The Right Dose**

Medications come in a variety of strengths or potencies. For this reason, only a licensed person (school nurse) is allowed to dispense a medication into the individual dose packets. Be sure to check the directions which the nurse has written out for you with the contents of the medication packets. If there is any discrepancy, do not give the medication, until you have clarified the directions with the school nurse.

**D. The Right Time/Frequency**

Each medication has a frequency which is specified by the physician and written on the medication administration sheet. This is how often the medication can be given. Medications should be administered no more than 1/2 hour before or 1/2 hour after the designated time. For example, Ritalin is prescribed to be given at noon. This means it could be given between 11:30 and 12:30. However, 12:00 is the optimal time. Check with the school nurse about giving medications outside of the ordered time.

## **E. The Right Drug**

It is equally important to ensure the correct medication is given to the patient. Double-check the name of the student with the medication label.

### **Side Effects**

In addition to the five rights of medication administration, you must be familiar with the side effects of the medication you are distributing. Training sheets are available regarding each of the medications being given. The physician has specified on the order form what reactions or side effects are likely. Be sure to familiarize yourself with these and contact the school nurse if they occur.

### **Contra-indication**

In certain situations, medications must be withheld if the student's condition fluctuates. This is called a contra-indication. For example, the physician has ordered insulin to be given before lunch for Yeh Shen if her blood sugar is greater than 60. If Yeh Shen's blood sugar is 40, giving insulin would be dangerous to her, and is therefore contra-indicated, or prohibited. If a medication must be withheld please notify the school nurse.

### **Actions/Reasons**

Medications are given for a variety of reasons. Sometimes, a side effect of a medication is desirable. For example, aspirin is commonly used to treat minor pain, but it causes the blood to "thin" as a side effect. Medications can be given for different conditions, so you should know what the student's health concern is in order to monitor whether the medication is having the desired effect.

**PASADENA UNIFIED SCHOOL DISTRICT  
HEALTH PROGRAMS**

**MEDICATION AND SPECIAL PROCEDURE TRAINING DOCUMENTATION**  
**For Unlicensed Assistive Personnel**

School \_\_\_\_\_ Year \_\_\_\_\_

Student: \_\_\_\_\_ Grade/Teacher \_\_\_\_\_

<u>Medication</u>	Date of Initial Training	<u>Medication</u>	Date of Initial Training
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

<u>Procedure</u>	<u>Procedure</u>
_____	_____
_____	_____

**Follow-up evaluations**

Procedure/Medication	Date	Procedure/Medication	Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

The following district personnel acknowledge receiving instruction from the school nurse in providing the above service to this student:

Date	Signature	Date	Signature
1. _____	_____	4. _____	_____
2. _____	_____	5. _____	_____
3. _____	_____	6. _____	_____

The above district personnel have been trained to provide the above services as indicated per MD order and/or district guidelines for this student.

\_\_\_\_\_  
School Nurse



**PASADENA UNIFIED SCHOOL DISTRICT**  
**Health Programs**

School Year: \_\_\_\_\_

School: \_\_\_\_\_

The following persons have been designated by the principal to administer medications according to physician's orders and parental request under the supervision of the school nurse:

**Name**

**Title**


These persons are mandated to receive instruction by the school nurse on the basic principles of medication administration as well as the side effects, actions, and contra-indications of medications specific to each student.

Principal Signature \_\_\_\_\_ Date \_\_\_\_\_

Nurse Signature \_\_\_\_\_ Date \_\_\_\_\_

# MEDICATION ADMINISTRATION

1. The Right Person
2. The Right Route
3. The Right Dose
4. The Right Time
5. The Right Frequency





PASADENA UNIFIED SCHOOL DISTRICT  
Division of School Operations and Support  
Health Programs

INFORMATION ITEM No. 1  
August 1, 2016

SUBJECT: ADMINISTRATION OF MEDICATION DURING SCHOOL HOURS

- I BACKGROUND
- II LEGAL REQUIREMENTS
- III IMPLEMENTATION

I BACKGROUND

Any pupil who is required to take medication prescribed for him by a physician, or OTC (over the counter) during the regular school day may be assisted by the school nurse and other designated school personnel (California Education Code - Section 49423). This assistance is provided to enable the pupil to remain in school, to maintain or improve health status, and to improve potential for education.

II LEGAL REQUIREMENTS

- The parent/guardian shall be notified of the right to have their child assisted in the taking of prescribed medication (Education Code 48980).
- Parent/guardian must sign a statement requesting that school personnel assist the pupil in taking medication during school hours (Education Code 49423).
- The physician must sign a statement detailing the method, amount, and time schedules by which such medication will be taken.
- A witnessed verbal consent from the physician obtained by the school nurse and documented on the student record may be used for episodic medication for 24 hours.
- The medication bottle provided by the parent must have the prescription label, complete with pupil's name and doctor's instruction.
- Locked storage for medications must exist in the school office.
- All medications must be kept locked up in the Health Office and may not be stored in the classroom for any reason.
- A form must be provided for recording the administration of medication.
- Parent request and physician statement must be renewed annually.
- Changes in medication regimen require new physician and parent statements.

### III IMPLEMENTATION

In the absence of the school nurse, the school administrator shall designate other school personnel who may assist the students with medication (Education Code 49423). The designated personnel shall receive in-service from the school nurse prior to providing such assistance. The in-service shall cover the legal requirement, method of administration, contraindications, signs and symptoms of adverse side effects, omission, and overdose including proper storage record keeping and emergency procedures.

In providing the medication to the student the school nurse/designated personnel will identify student, check physician statement against medication label (IF THERE IS A DISCREPANCY, DO NOT GIVE MEDICATION). Administer the prescribed dosage of medicine and record date, time and signature on pupil medication record each time medication is given.

Where there is not a full time school nurse assigned all daily student medications will be counted out by the Nurse for the week and placed into marked envelopes for each day of the week (day and student's name will be written on each envelope).

Whenever possible, parents are asked to enlist the physician's cooperation in working out a schedule which will eliminate the necessity of administering medication at school.

Except for prescription given under the procedure outlined in this bulletin, no medicine of any nature may be given to a pupil by any employee of the district.

For assistance, please call Ann Rector, Coordinator, Health Programs, at (626)396-3600 EXT. 88240

APPROVED: Dr. Shawn Bird, Chief Academic Officer

DISTRIBUTION All Staff

## **Administration of Medication During School Hours Board Policy Students**

The Governing Board believes that regular school attendance is critical to student learning and that students who need to take medication prescribed or ordered for them by their authorized health care providers should have an opportunity to participate in the educational program.

*(cf. 5113 - Absences and Excuses)*  
*(cf. 5113.1 - Chronic Absence and Truancy)*

Any medication prescribed for a student with a disability who is qualified to receive services under the Individuals with Disabilities Education Act or Section 504 of the Rehabilitation Act of 1973 shall be administered in accordance with the student's individualized education program or Section 504 services plan as applicable.

*(cf. 6159 - Individualized Education Program)*  
*(cf. 6164.6 - Identification and Education Under Section 504)*

For the administration of medication to other students during school or school-related activities, the Superintendent or designee shall develop protocols which shall include options for allowing a parent/guardian to administer medication to his/her child at school, designate other individuals to do so on his/her behalf, and, with the child's authorized health care provider's approval, request the district's permission for his/her child to self-administer a medication or self-monitor and/or self-test for a medical condition. Such processes shall be implemented in a manner that preserves campus security, minimizes instructional interruptions, and promotes student safety and privacy.

*(cf. 1250 - Visitors/Outsiders)*  
*(cf. 5141 - Health Care and Emergencies)* *(cf. 5141.22 - Infectious Diseases)*  
*(cf. 5141.23 - Asthma Management)*  
*(cf. 5141.27 - Food Allergies/Special Dietary Needs)* *(cf. 6116 - Classroom Interruptions)*

In addition, the Superintendent or designee shall collaborate with city and county emergency responders, including local public health administrators, to design procedures or measures for addressing an emergency such as a public disaster or epidemic.

*(cf. 3516 - Emergencies and Disaster Preparedness Plan)*

### **Administration of Medication by School Personnel**

Any medication prescribed by an authorized health care provider, including, but not limited to, emergency antiseizure medication for a student who suffers epileptic seizures, auto-injectable epinephrine, or glucagon may be administered by the school nurse or other designated school personnel only when the Superintendent or designee has received written statements from both the student's parent/guardian and authorized health care provider. (Education Code 49414.7, 49423; 5 CCR 600)

Only a school nurse or other school employee with an appropriate medical license may administer an insulin injection to a student. In the event that no such licensed school personnel is available, the district may contract with a licensed nurse from a public or private agency to administer insulin to the student.

*(cf. 5141.24 – Specialized Health Care Services)*

When medically unlicensed school personnel are authorized by law to administer any medication to students, such as emergency antiseizure medication, auto-injectable epinephrine, or glucagon, the Superintendent or designee shall ensure that school personnel designated to administer any medication receive appropriate training and, as necessary, retraining from qualified medical personnel before any medication is administered. At a minimum, the training shall cover how and when such medication should be administered, the recognition of symptoms and treatment, emergency follow-up procedures, and the proper documentation and storage of medication. Such trained, unlicensed designated school personnel shall be supervised by, and provided with immediate communication access to, a school nurse, physician, or other appropriate individual. (Education Code 49414, 49414.5, 49414.7, 49423, 49423.1)

The Superintendent or designee shall maintain documentation of the training and ongoing supervision, as well as annual written verification of competency of other designated school personnel.

*(cf. 4131 - Staff Development)*

*(cf. 4231 - Staff Development)*

*(cf. 4331 - Staff Development)*

School nurses and other designated school personnel shall administer medications to students in accordance with law, Board policy, and administrative regulation and shall be afforded appropriate liability protection.

*(cf. 3530 - Risk Management/Insurance)*

*(cf. 4119.42/4219.42/4319.42 - Exposure Control Plan for Bloodborne Pathogens) (cf. 4119.43/4219.43/4319.43 - Universal Precautions)*

*Legal Reference:*

EDUCATION CODE

48980 - Notification at beginning of term

49407 - Liability for treatment

49408 - Emergency information

49414 - Emergency epinephrine auto-injectors

49414.5 - Providing school personnel with voluntary emergency training

49414.7 - Emergency medical assistance: administration of epilepsy medication 49422-

49427 - Employment of medical personnel, especially:

49423 - Administration of prescribed medication for student

49423.1 - Inhaled asthma medication

49480 - Continuing medication regimen; notice

BUSINESS AND PROFESSIONS CODE

2700-2837 - Nursing, especially:

2726 - Authority not conferred 2727

- Exceptions in general 3501 -

Definitions

CODE OF REGULATIONS, TITLE 5

600-611 - Administering medication to students

620-627 - Administration of emergency antiseizure medication by trained volunteer nonmedical school personnel

UNITED STATES CODE, TITLE 20

1232g - Family Educational Rights and Privacy Act of 1974 1400-

1482 - Individuals with Disabilities Education Act UNITED

STATES CODE, TITLE 29

794 - Rehabilitation Act of 1973, Section 504

COURT DECISIONS

*American Nurses Association v. Torlakson*, (2013) 57 Cal.App.4th 570

*Management Resources:* CSBA

PUBLICATIONS

*Pandemic Influenza, Fact Sheet, September 2007*

AMERICAN DIABETES ASSOCIATION PUBLICATIONS

Glucagon Training Standards for School Personnel: Providing Emergency Medical

Assistance to Pupils with Diabetes, May 2006 CALIFORNIA

DEPARTMENT OF EDUCATION PUBLICATIONS

*Legal Advisory on Rights of Students with Diabetes in California's K-12 Public Schools,*  
August 2007

*Training Standards for the Administration of Epinephrine Auto-Injectors,*  
December 2004

NATIONAL DIABETES EDUCATION PROGRAM PUBLICATIONS

*Helping the Student with Diabetes Succeed: A Guide for School Personnel, June 2003*

WEB SITES

CSBA: <http://www.csba.org>

American Diabetes Association: <http://www.diabetes.org>

California Department of Education, Health Services and School Nursing:  
<http://www.cde.ca.gov/ls/he/hn>

National Diabetes Education Program: <http://www.ndep.nih.gov>

U.S. Department of Health and Human Services, National Institutes of Health, Blood Institute,  
asthma information: <http://www.nhlbi.nih.gov/health/public/lung/index.htm#asthma>

**Policy**

**Adopted:** July 9, 1996

**Revised:** June 26, 2012; June 26, 2014

**PASADENA UNIFIED SCHOOL DISTRICT**

Pasadena, California

## **Authorized Health Care Provider**

AR 5141.21(a)

### **Definitions**

Authorized health care provider means an individual who is licensed by the State of California to prescribe or order medication, including, but not limited to, a physician or physician assistant. (Education Code 49423; 5 CCR 601)

Other designated school personnel means any individual employed by the district, including a nonmedical school employee, who has volunteered or consented to administer medication or otherwise assist the student and who may legally administer the medication to the student or assist the student in the administration of the medication. (5 CCR 601, 621)

Medication may include not only a substance dispensed in the United States by prescription, but also a substance that does not require a prescription, such as over-the-counter remedies, nutritional supplements, and herbal remedies. (5 CCR 601)

Emergency medical assistance for a student suffering an epileptic seizure means the administration of an emergency anti-seizure medication such as diazepam rectal gel and other emergency medications approved by the federal Food and Drug Administration for patients suffering from epileptic seizures. (Education Code 49414.7; 5 CCR 621)

Epinephrine auto-injector means a disposable drug delivery system with a spring-activated needle that is designed for emergency administration of epinephrine to provide rapid, convenient first aid for persons suffering a potentially fatal reaction to anaphylaxis. (Education Code 49414)

Anaphylaxis means a potentially life-threatening hypersensitivity to a substance, which may result from an insect sting, food allergy, drug reaction, exercise, or other cause. Symptoms may include shortness of breath, wheezing, difficulty breathing, difficulty talking or swallowing, hives, itching, swelling, shock, or asthma. (Education Code 49414)

*(cf. 5141.23 - Asthma Management)*

*(cf. 5141.27 - Food Allergies/Special Dietary Needs)*

### **Notifications to Parents/Guardians**

At the beginning of each school year, the Superintendent or designee shall notify parents/guardians of the options available to students who need to take prescribed medication during the school day and the rights and responsibilities of parents/guardians regarding those options. (Education Code 49480)

*(cf. 5145.6 - Parental Notifications)*

In addition, the Superintendent or designee shall inform the parents/guardians of any student on a continuing medication regimen for a non-episodic condition of the following requirements: (Education Code 49480)

1. The parent/guardian is required to inform the school nurse or other designated employee of the medication being taken, the current dosage, and the name of the supervising physician.
2. With the parent/guardian's consent, the school nurse or other designated employee may communicate with the student's physician regarding the medication and its effects and may counsel school personnel regarding the possible effects of the medication on the student's physical, intellectual, and social behavior, as well as possible behavioral signs and symptoms of adverse side effects, omission, or overdose.

### **Parent/Guardian Responsibilities**

The responsibilities of the parent/guardian of any student who may need medication during the school day shall include, but are not limited to:

1. Providing parent/guardian and authorized health care provider written statements each school year as described in the sections "Parent/Guardian Statement" and "Health Care Provider Statement" below. The parent/guardian shall provide a new authorized health care provider's statement if the medication, dosage, frequency of administration, or reason for administration changes. (Education Code 49414.5, 49414.7, 49423, 49423.1; 5 CCR 600, 626)
2. If the student is on a continuing medication regimen for a nonepisodic condition, informing the school nurse or other designated certificated employee of the medication being taken, the current dosage, and the name of the supervising physician and updating the information when needed. (Education Code 49480)
3. If the student suffers from epilepsy, notifying the principal or designee whenever the student has had an emergency antiseizure medication administered to him/her within the past four hours on a school day. (Education Code 49414.7)
4. Providing medications in properly labeled, original containers along with the authorized health care provider's instructions. For prescribed or ordered medication, the container also shall bear the name and telephone number of the pharmacy, the student's identification, and the name and phone number of the authorized health care provider. (5 CCR 606)

### **Parent/Guardian Statement**

When district employees are to administer medication to a student, the parent/guardian's written shall contain:

1. Identify the student
2. Grant permission for an authorized district representative to communicate directly with the student's authorized health care provider and pharmacist, as may be necessary, regarding the health care provider's written statement or any other questions that may arise with regard to the medication

3. Contain an acknowledgment that the parent/guardian understands how district employees will administer the medication or otherwise assist the student in its administration
4. Contain an acknowledgment that the parent/guardian understands his/her responsibilities to enable district employees to administer or otherwise assist the student in the administration of medication, including, but not limited to, the parent/guardian's responsibility to provide a written statement from the authorized health care provider, to ensure that the medication is delivered to the school in a proper container by an individual legally authorized to be in possession of the medication, and to provide all necessary supplies and equipment
5. Contain an acknowledgment that the parent/guardian understands that he/she may terminate the consent for the administration of the medication or for otherwise assisting the student in the administration of medication at any time

In addition to the requirements in items #1-5 above, if a parent/guardian has requested that his/her child be allowed to carry and self-administer prescription auto-injectible epinephrine or prescription inhaled asthma medication, the parent/guardian's written statement shall: (Education Code 49423, 49423.1)

1. Consent to the self-administration
2. Release the district and school personnel from civil liability if the student suffers an adverse reaction as a result of self-administering the medication

In addition to the requirements in items #1-5 above, if a parent/guardian wishes to designate an individual who is not an employee of the district to administer medication to his/her child, the parent/guardian's written statement shall clearly identify the individual and shall state:

1. The individual's willingness to accept the designation
2. That the individual is permitted to be on the school site
3. Any limitations on the individual's authority

### **Health Care Provider Statement**

When any district employee is to administer prescribed medication to a student, or when a student is to be allowed to carry and self-administer auto-injectible epinephrine or prescribed diabetes or asthma medication during school hours, the authorized health care provider's written statement shall include:

1. Clear identification of the student (Education Code 49414.7, 49423, 49423.1; 5 CCR 602, 626)



2. The name of the medication (Education Code 49414.7, 49423, 49423.1; 5 CCR 602, 626)
3. The method, amount, and time schedules by which the medication is to be taken (Education Code 49414.7, 49423, 49423.1; 5 CCR 602, 626)
4. If a parent/guardian has requested that his/her child be allowed to self-administer medication, confirmation that the student is able to self-administer the medication (Education Code 49423, 49423.1; 5 CCR 602)
5. For medication that is to be administered on an as-needed basis, the specific symptoms that would necessitate administration of the medication, allowable frequency for administration, and indications for referral for medical evaluation
6. Possible side effects of the medication
7. Name, address, telephone number, and signature of the student's authorized health care provider

When authorizing a district employee to administer emergency antiseizure medication to a student, the authorized health care provider's written statement shall also include the following: (Education Code 49414.7; 5 CCR 626)

1. Detailed seizure symptoms, including frequency, type, or length of seizures that identify when the administration of the medication becomes necessary
2. Any potential adverse responses by the student and recommended mitigation actions, including when to call emergency services
3. A protocol for observing the student after a seizure, including, but not limited to, whether he/she should rest in the school office or return to his/her class and the length of time he/she should be under direct observation
4. A statement that, following a seizure, a school administrator or other staff member shall contact the school nurse and the student's parent/guardian to continue the observation plan

### **District Responsibilities**

The school nurse or other designated school personnel shall:

1. Administer or assist in administering medication in accordance with the authorized health care provider's written statement
2. Accept delivery of medications from parents/guardians and count and record them upon receipt
3. Maintain a list of students needing medication during the school day, including those

authorized to self-administer medication, and note on the list the type of medication and the times and dosage to be administered

4. Maintain for each student a medication log which may:
  - a. Specify the student's name, medication, dose, and method of administration, time of administration during the regular school day, date on which the student is required to take the medication, and the authorized health care provider's name and contact information
  - b. Contain space for daily recording of the date, time, and amount of medication administered, and the signature of the individual administering the medication
5. Maintain for each student a medication record which may include the authorized health care provider's written statement, the parent/guardian's written statement, the medication log, and any other written documentation related to the administration of medication to the student
6. Ensure that student confidentiality is appropriately maintained

*(cf. 5125 - Student Records)*

7. Coordinate and, as appropriate, ensure the administration of medication during field trips and other school-related activities

*(cf. 5148.2 - Before/After School Programs)*

*(cf. 6145.2 - Athletic Competition)*

*(cf. 6153 - School-Sponsored Trips)*

8. Report to a student's parent/guardian and the site administrator any refusal by the student to take his/her medication
9. Keep all medication to be administered by the district in a locked drawer or cabinet
10. As needed, communicate with a student's authorized health care provider and/or pharmacist regarding the medication and its effects
11. Counsel other designated school personnel regarding the possible effects of a medication on a student's physical, intellectual, and social behavior, as well as possible behavioral signs and symptoms of adverse side effects, omission, or overdose
12. Ensure that any unused, discontinued, or outdated medication is returned to the student's parent/guardian at the end of the school year or, if the medication cannot be returned, dispose of it in accordance with state laws and local ordinances
13. Provide immediate medical assistance if needed and report to the site administrator, the

student's parent/guardian, and, if necessary, the student's authorized health care provider any instance when a medication is not administered properly, including administration of the wrong medication or failure to administer the medication in accordance with authorized health care provider's written statement

### **Additional Requirements for Management of Epileptic Seizures**

In addition to applicable provisions in the sections above, the Superintendent or designee shall make arrangements for assisting students with epilepsy who may suffer a seizure at school. Such arrangements shall include the following: (Education Code 49414.7; 5 CCR 620-627)

1. **Services or Accommodations:** Whenever a parent/guardian requests that a nonmedical district employee be trained to provide emergency medical assistance to his/her child, the parent/guardian shall be notified that the child may qualify for services or accommodations pursuant to 20 USC 1400-1482, the Individuals with Disabilities Education Act (IDEA), or 29 USC 794, Section 504 of the federal Rehabilitation Act of 1973 (Section 504).

*(cf. 6159 - Individualized Education Program)*

*(cf. 6164.4 - Identification and Evaluation of Individuals for Special Education)*

*(cf. 6164.6 - Identification and Education under Section 504)*

The Superintendent or designee shall assist the parent/guardian to explore that option and shall encourage him/her to adopt the option if the student is determined to be eligible for such service or accommodation.

If the student's parent/guardian refuses to have him/her assessed for services or accommodations under IDEA or Section 504, the Superintendent or designee may develop an individualized health plan, seizure action plan, or other appropriate health plan designed to acknowledge and prepare for the student's health care needs in school.

2. **Request for Volunteers:** The Superintendent or designee shall distribute an electronic notice to school staff no more than twice per school year per student whose parent/guardian has requested provision of emergency medical assistance pursuant to Education Code 49414.7. The notice shall be in bold print and, in accordance with Education Code 49414.7, shall contain a description of the request for a volunteer school employee, the training that such volunteer school employee will receive, the voluntary nature of the program, and the timelines for the volunteer school employee to rescind his/her offer. No other means of soliciting volunteer school employees shall be conducted.

*(cf. 4112.9/4212.9/4312.9 - Employee Notifications)*

If no employee volunteers to administer emergency antiseizure medication to a student, the Superintendent or designee shall again notify the student's parent/guardian of the option to have the student assessed for services and accommodations under IDEA or

Section 504.

3. Training: Any employee who volunteers to administer an emergency anti-seizure medication shall receive from a licensed health care professional the training specified in 5 CCR 623 before administering such medication. The training shall include, but is not limited to:
  - a. Recognition and treatment of different types of seizures
  - b. Administration of an emergency anti-seizure medication
  - c. Basic emergency follow-up procedures, including, but not limited to, a requirement for the principal or designee to call the emergency 911 telephone number and to contact the student's parent/guardian, but not necessarily to transport the student to an emergency room
  - d. Techniques and procedures to ensure student privacy

*(cf. 4131 - Staff Development)*

*(cf. 4231 - Staff Development)*

*(cf. 4331 - Staff Development)*

*(cf. 5022 - Student and Family Privacy Rights)*

When a trained employee has not administered an emergency anti-seizure medication to a student within two years after completing the training and a student who may need the administration of an emergency anti-seizure medication is enrolled in the school, the employee shall be retrained in order to retain the ability to administer an emergency anti-seizure medication.

4. Notification of Administration: The Superintendent or designee shall establish a process for notifying the credentialed school nurse, or the Superintendent or designee as applicable, whenever an employee administers an emergency antiseizure medication to a student at a school site.
5. Supervision of Volunteers: Volunteer school employees shall be supervised by a licensed health care professional in accordance with 5 CCR 627.

### **Emergency Epinephrine Auto-Injectors**

The Superintendent or designee shall provide epinephrine auto-injectors to school nurses or other employees who have volunteered to administer them in an emergency and have received training. The school nurse, or a volunteer employee when a school nurse or physician is unavailable, may administer an epinephrine auto-injector to provide emergency medical aid to any person suffering, or reasonably believed to be suffering, from potentially life-threatening symptoms of anaphylaxis at school or a school activity. (Education Code 49414)

At least once per school year, the Superintendent or designee shall distribute to all staff a notice requesting volunteers to be trained to administer an epinephrine auto-injector and describing the training that the volunteer will receive. (Education Code 49414)

The principal or designee at each school may designate one or more volunteers to receive initial and annual refresher training, which shall be provided by a school nurse or other qualified person designated by a physician and surgeon authorized pursuant to Education Code 49414, and shall be based on the standards developed by the Superintendent of Public Instruction. Written materials covering the required topics for training shall be retained by the school for reference. (Education Code 49414)

A school nurse or other qualified supervisor of health or a district administrator if the district does not have a qualified supervisor of health, shall obtain a prescription for epinephrine auto-injectors for each school from an authorized physician and surgeon. Such prescription may be filled by local or mail order pharmacies or epinephrine auto-injector manufacturers. Elementary schools shall, at a minimum, be provided one adult (regular) and one junior epinephrine auto-injector. Secondary schools shall be provided at least one adult (regular) epinephrine auto-injector, unless there are any students at the school who require a junior epinephrine auto-injector. (Education Code 49414)

If an epinephrine auto-injector is used, the school nurse or other qualified supervisor of health shall restock the epinephrine auto-injector as soon as reasonably possible, but no later than two weeks after it is used. In addition, epinephrine auto-injectors shall be restocked before their expiration date. (Education Code 49414)

Information regarding defense and indemnification provided by the district for any and all civil liability for volunteers administering epinephrine auto-injectors shall be provided to each volunteer and retained in his/her personnel file. (Education Code 49414)

*(cf. 4112.6/4212.6/4312.6 - Personnel Files)*

A school may accept gifts, grants, and donations from any source for the support of the school in carrying of the requirements of Education Code 49414, including, but not limited to, the acceptance of epinephrine auto-injectors from a manufacturer or wholesaler. (Education Code 49414)

*(cf. 3290 - Gifts, Grants and Bequests)*

The Superintendent or designee shall maintain records regarding the acquisition and disposition of epinephrine auto-injectors for a period of three years from the date the records were created. (Business and Professions Code 4119.2)

*(cf. 3580 - District Records)*

**Regulation**

**Approved:** July 9, 1996

**Revised:** June 26, 2012; June 26, 2014; July 16, 2015

**PASADENA UNIFIED SCHOOL DISTRICT**

Pasadena, California



PASADENA UNIFIED SCHOOL DISTRICT  
EDUCATION CENTER . HEALTH PROGRAMS

School \_\_\_\_\_ Date \_\_\_\_\_

Dear Parent/Guardian:

Recent California Legislation allows public schools to develop a sunscreen use policy. In our school district, the over-the-counter medication policy will no longer apply to the use of sunscreen at school.

If you desire to have sunscreen applied to your child during the school day, please complete the attached parental permission slip and return it to your school nurse. Dermatologists recommend the use of sunscreens which provide: **SPF 15 or higher and Broad Spectrum, coverage (blocks both UVA and UVB light.)**

Daily sunscreen use is certainly important but it is just one component to sun protection for your child. Please don't overlook the importance of providing a sun-protective hat as well as sun-protective clothing for your child's outdoor activities at school.

Sincerely,

Ann Rector  
Coordinator of Health Programs

APPROVED:

Dr. Shawn Bird  
Chief Academic Officer



PASADENA UNIFIED SCHOOL DISTRICT  
EDUCATION CENTER • HEALTH PROGRAMS

Escuela \_\_\_\_\_

Fecha \_\_\_\_\_

Estimado Padre o Tutor:

La Legislatura de California recientemente permite a las escuelas públicas a que desarrollen una regla para el uso de protección contra el sol (sunscreen). En nuestro distrito escolar ya no se aplicará la regla de medicamento sin prescripción para el uso de protección contra el sol en la escuela.

Si desean que se le aplique la protección contra el sol a su niño durante las horas de clases, por favor complete la forma de permiso de los padres que va adjunta y regrésela a la enfermera de su escuela. Dermatólogos recomiendan el uso de protección contra el sol el cual provee: **SPF 15 o más elevado y cubre un espectro más amplio (bloqueo de ambas luces la UVA y UVB.)**

El uso diario de protección contra el sol en verdad es importante pero solamente es un componente para proteger del sol a su niño. Por favor no olvide la importancia de proveer sombrero para protección del sol, así como también ropa protectora contra el sol para las actividades de su niño al aire libre en la escuela.

Sinceramente,

Ann Rector  
Coordinadora de los Programas de Salud

APROBADO:

Dr. Shawn Bird  
Chief Academic Officer

**PASADENA UNIFIED SCHOOL DISTRICT  
HEALTH PROGRAMS**

**ADMINISTRATION OF SUNSCREEN DURING SCHOOL HOURS**

Name of Student \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_ Home Phone \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_ Teacher \_\_\_\_\_

Date \_\_\_\_\_

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Recent amendments to the California Education Code Section 35183.5 allow children to apply sunscreen while on campus with this signed permission slip.

**To the Parent or Guardian:** I give consent for my child to apply sunscreen to exposed skin areas prior to outdoor activities. I understand that a staff member may assist my child (age 7 years of age or younger) with sunscreen application to exposed skin areas prior to outdoor activity. I further understand that I will maintain an individual supply of sunscreen for my child.

Signature of parent or guardian \_\_\_\_\_

Date \_\_\_\_\_



**DISTRITO ESCOLAR UNIFICADO DE PASADENA  
PROGRAMAS DE SALUD**

**ADMINISTRACIÓN DE PROTECCIÓN CONTRA EL SOL DURANTE  
LAS HORAS DE CLASES**

Nombre del Estudiante \_\_\_\_\_ Fecha de Nacimiento \_\_\_\_\_

Domicilio \_\_\_\_\_ Teléfono del Hogar \_\_\_\_\_

Escuela \_\_\_\_\_ Grado \_\_\_\_\_ Maestro/a \_\_\_\_\_

Fecha \_\_\_\_\_

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Enmiendas recientes a la Sección 35183.5 del Código de Educación de California permiten que los niños se pongan protección contra el sol mientras estén en los terrenos escolares con esta forma de permiso firmada.

**Al Padre o Tutor:** Yo, doy mi consentimiento para que mi niño se ponga protección contra el sol en las áreas en que la piel esté expuesta al sol antes de las actividades al aire libre. Yo entiendo que una persona del personal docente ayudará a mi niño (de 7 años de edad o menor) con la aplicación de protección contra el en las áreas en que la piel esté expuesta al sol antes de las actividades al aire libre. Aún más, yo comprendo que debo mantener un suministro individual de protección contra el sol para mi niño.

Firma del padre o tutor \_\_\_\_\_

Fecha \_\_\_\_\_

PASADENA UNIFIED SCHOOL DISTRICT  
HEALTH PROGRAMS

SCHOOL SITE POLICY

SB 1632/CHAPTER 266 – SUN PROTECTION FOR PUPILS  
“BILLY’S BILL” FOR SUN SAFETY”  
Education Code, Section 35183.5

Recent legislation requires school sites to allow pupils to use sunscreen during the school day without a physician’s note or prescription, and authorizes school sites to set a policy related to the use of sunscreen.

Overexposure to ultraviolet (UV) radiation can cause serious health effects, including skin cancer and other skin disorders. Currently, one in five Americans develops skin cancer during their lifetime. Children are of particular concern since most of the average person’s lifetime sun exposure occurs before the age of 18. The district maintains a sunscreen policy to assist students in the development of skills necessary for lifelong sun safety behaviors.

School Site Policies

- Parents shall be strongly encouraged to ensure the application of sunscreen to exposed areas of their child’s skin prior to the child coming to school each day. (See attached parent letter)
- Parents would provide a supply of sunscreen for their child’s use while at school. (See attached parent permission slip for sunscreen use)
- Students, age 8 years and older, who have not already applied sunscreen prior to coming to school, shall be permitted to apply sunscreen to exposed areas of skin prior to engaging in outdoor activities, if a signed permission slip is on file at the school.
- For outdoor field trips, students, age 8 years and older, shall be permitted to apply sunscreen to areas of skin not protected by hat or clothing, if a signed permission slip is on file at the school.
- Any school staff member may assist a child, 7 years of age or younger, with application of sunscreen to exposed areas, not protected by a have or clothing, if a signed permission slip is on file at the school.
- Each school site shall allow for outdoor use during the school day, articles of sun-protective clothing, including hats.
  - Students will be encouraged to wear a sun-protective hat when outdoors and on outdoor field trips.
  - Hats will not be permitted to be worn indoors.
- Students are permitted to wear UV protective sunglasses when outdoors.