

# OFFICE OF CATHOLIC SCHOOLS ARCHDIOCESE OF CHICAGO

## SCHOOL MEDICATION PROCEDURES

*Parents/guardians have the primary responsibility for the administration of medication to their children. The administration of medication to students during regular school hours and during school related activities is discouraged unless necessary for the critical health and well being of the student.*

*It is the policy of this school that school personnel, including teachers, administrators, administrative staff, shall not administer medication to students except as provided in the School Medication Procedures established for the administration of medication.*

*Compliance with the School Medication Procedures established for the administration of medication is the responsibility of the parent/guardian.*

### **Procedures**

**1. Medication Authorization Form.** No school personnel shall administer any prescription or non-prescription medicine unless a complete Medication Authorization Form for such student has been received by the School Principal or his/her designee. No student shall be allowed to possess or consume any prescription or non-prescription medication unless a complete Medication Authorization Form for such student has been received by the School Principal or his/her designee.

Medication Authorization Forms are available at the school office. In addition, a **Medication Authorization Form** is distributed for each student at the time of enrollment. A **Medication Authorization Form** is complete if it contains the following information:

a. A written prescription issued by a physician, dentist or other licensed prescriber. The prescription must set forth the child's name, licensed prescriber's signature and telephone number, medication name and dosage, and date of order;

b. Written administration instructions written by the licensed prescriber setting forth the route, time or intervals of administration, and the duration of the prescription;

c. Written indication, on the medication or by separate notation of the licensed prescriber, of the diagnosis requiring medication, intended effects and possible side effects of the medication; and,

d. Written permission and authorization for the administration of medication signed by the student's parent/guardian.

**2. Appropriate Containers.** It is the responsibility of the parent/guardian to provide the school with all medication in appropriate containers. Only medication for which a complete Medication Authorization Form has been received by the School Principal or his/her designee shall be allowed in the school. All such medication shall be provided in containers which are:

a. Prescription-labeled by a pharmacy or licensed prescriber (displaying Rx number, student name, medication, dosage, direction for administration, date and refill schedule, pharmacy label, and name/initials of pharmacist) or

b. Manufacturer-labeled for non-prescription over-the-counter medication.

**3. Administration.** Administration of medication means dispensing, distributing, or adherence to the route by which the medication is to be administered indicated on the completed Medication Authorization Form.

Medication will not be administered to any student by any school personnel unless the complete Medication Authorization Form contains the written request and authorization of a parent/guardian to have the School Principal or his/her designee, or school nurse (if applicable), administer such medication to the student, and the School Principal or school nurse (if applicable) has agreed in writing to administer the medication as set forth in the complete Medication Authorization Form. Such written agreement by the School Principal or school nurse shall be indicated on the completed Medication Authorization Form. The School Principal, or school nurse, retains the right to deny such requests to administer medication to the students provided that such denial is indicated on the completed **Medication Authorization Form**.

Parents/guardians must make other arrangements for the administration of medication to students, such as arranging for medication to be administered before or after school or having the parent/guardian come to the school to administer medication, if:

a. A completed **Medication Authorization Form** has not been received and approved by the School Principal for the medication sought to be administered; or

b. A request and authorization for the administration of medication is denied by the School Principal or school nurse; or

c. The medication identified in the completed **Medication Authorization Form** is not given the School Principal in an appropriate container as described herein.

**4. Self-Administration.** A student may self-administer medication at school if so ordered by his or her licensed prescriber. Except as provided in Section 6, below, such medication must be stored in a locked cabinet under the control of the School Principal or his/her designee and a completed **Medication Authorization Form** must be received by the School Principal. The completed **Medication Authorization Form** must contain a written statement signed by the licensed prescriber and the parent/guardian verifying the necessity and the student's ability to self-administer the medication appropriately.

Except as provided in Section 6, below, self-administration of medication shall be under the supervision of the School Principal or his/her designee or the school nurse (if applicable).

**5. Storage of Medication.** Medication received by the school in accordance with a completed **Medication Authorization Form** and in an appropriate container shall be stored in a locked cabinet. Access to the locked cabinet shall be limited to the School Principal and his/her designees, and the school nurse (if applicable).

Medication requiring refrigeration shall be stored in a refrigerator that cannot be accessed by students and shall be kept separate from food items.

At the end of the school year, or the end of the treatment regime, the student's parent/ guardian will be responsible for removing any unused medication from the school. If the parent/guardian does not pick up the medication by the end of the school year, the medication will be appropriately discarded by the School Principal.

**6. Carrying and Unsupervised Self-Administration of Medication.** Students who suffer from asthma or allergies that require the immediate use of medication shall be permitted to carry such medication and to self-administer such medication without supervision by school personnel only if the following conditions are met:

a. A completed **Medication Authorization Form** has been received by the School Principal or his/her designee or by the school nurse (if applicable).

b. A completed **Physician Request for Self-Administration of Medication** form has been completed by the student's physician and parent/guardian and received by the School Principal or his/her designee or by the school nurse (if applicable).

**7. Emergency Medical Care.** In the event a student shall become ill or injured or otherwise need immediate medical attention that is not contained in the **Medical Authorization Form** on file with the School Principal or his/her designee or with the School nurse (if applicable), the Principal or his/her designee shall attempt to contact the student's parent/guardian utilizing the information provided on the student's **Medical Information and Emergency Notification Form**. If the student's parent/guardian cannot be contacted, the School Principal or his/her designee shall attempt to contact the person identified by the parent/guardian as the student's emergency contact. In either event, such contact shall be made to advise of the observed illness or injury or need for medical attention and to obtain further instructions from the student's parent/guardian or emergency contact.

Notwithstanding the foregoing, the School Principal or his/her designee or School nurse (if applicable) or other certified school personnel may call State or local emergency medical services before or after attempting to call the student's parent/guardian or emergency contact if, in the exercise of school-related supervision of the student, the student's illness, injury or need for immediate medical attention is perceived to be in need of emergency medical care.