

# Dickson County Board of Education

Monitoring: <b>Review: Annually, in August</b>	Descriptor Term:  <b>Medications</b>	Descriptor Code: <b>6.405</b>	Issued Date: <b>04/22/21</b>
		Rescinds: <b>6.405</b>	Issued: <b>02/28/13</b>

1 If under exceptional circumstances a child is required to take non-prescription or prescription  
2 medication during school hours and the parent cannot be at school to administer the medication, only  
3 the principal/ designee will assist in self-administration of the medication if the student is competent to  
4 self-administer medicine with assistance in compliance with the following regulations:<sup>1</sup>

- 5 1. Written instructions signed by the parent will be required and will include: child's name, name  
6 of medication, name of physician, time to be self-administered, dosage and directions for self-  
7 administration, possible side effects, if known, and termination date for self-administration.
- 8 2. The medication must be delivered to the principal's/designee's office in person by the  
9 parent/guardian.

## 10 **EMERGENCY MEDICATIONS:**

11 Inhalers/Epi-pens: May be kept with the nurse, the student or classroom teacher. Students carrying  
12 inhalers/Epi-pens must have a doctor's order on file stating that the student is competent to carry and  
13 administer emergency medication unsupervised as needed.

14 Students with asthma shall be permitted to self-administer prescribed, metered dosage asthma-reliever  
15 inhalers if the additional information is provided by a parent/guardian:

- 16 1. Written statement from the prescribing health practitioner that the student suffers from asthma  
17 and has been instructed in self-administration; and
- 18 2. Purpose of the medication.

19 The medication shall be derived to the principal's office in person by the parent/guardian of the student  
20 unless the medication shall be retained by the student for immediate self-administration.

## 21 **DISPOSAL OF OLD OR UNUSED MEDICINES**

22 It shall be the responsibility of the parent to pick-up any remaining or unused medication at the end of  
23 the treatment regimen or the end of the school year. Any medication remaining at school at the end of  
24 the school year shall be disposed of properly.

## 25 **GUIDELINES FOR ADMINISTRATION**

26 Each dose of medication shall be documented. Documentation shall include name of medication, date,  
27 time, dosage, and signature of the person assisting the child in self-administration. All medication shall  
28 be kept in a locked area, unless otherwise classified as an emergency medication as above.

29 The principal/designee will:

- 1 1. Inform appropriate school personnel of the medication to be self-administered;
- 2 2. Keep written instructions from the parent/guardian in the students' record;
- 3 3. Keep an accurate record of the self-administration of the medication;
- 4 4. Return unused prescription to the parent/guardian only; and
- 5 5. Ensure that all guidelines developed by the Department of Health and the Department of
- 6 Education are followed.

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## 8 **BLOOD GLUCOSE SELF-CHECKS<sup>2</sup>**

9 Upon written request of a parent/guardian, and if included in the student's medical management plan, a  
10 student with diabetes shall be permitted to perform a blood glucose check or administer insulin using  
11 any necessary diabetes monitoring and treatment supplies, including sharps. The student shall be  
12 permitted to perform the testing in any area of the school or campus at any time necessary. Sharps shall  
13 be stored in a secure, but accessible location, including the student's person, until use of such sharps is  
14 appropriate.

15 Use and disposal of sharps shall be in compliance with Tennessee occupational Safety and Health  
16 Administration (TOSHA) guidelines.<sup>3</sup>

## 17 **STUDENTS WITH PANCREATIC INSUFFICIENCY OR CYSTIC FIBROSIS<sup>4</sup>**

18 Students diagnosed with pancreatic insufficiency or cystic fibrosis shall be permitted to self-manage  
19 their prescribed medication in a manner directed by a licensed health care provider without additional  
20 assistance or direction. The Director of Schools shall develop procedures for the development of an  
21 IHP for every student that wishes to self-administer.

## 22 **STUDENTS WITH ADRENAL INSUFFICIENCY<sup>5</sup>**

23 The parent/guardian of a student diagnosed with adrenal insufficiency shall notify the school district of  
24 the student's diagnosis. Once notified the district shall observe the following guidelines.

- 25 1. The district shall train school personnel who will be responsible for administering the  
26 medication for the treatment of adrenal insufficiency and any who volunteer to administer the  
27 medication;
- 28 2. The district shall maintain a record of all school personnel who have completed this training:  
29 and
- 30 3. If a student is suffering from an adrenal crisis, a school nurse or other licensed health care  
31 professional may administer the prescribed medication to the student. If a school nurse or other  
32 licensed health care professional is not immediately available, trained school personnel may  
33 administer the prescribed medication.

34 The Director of Schools shall develop procedures on the administration of medications that treat  
35 adrenal insufficiency, including the treatment of an adrenal crisis while on school transportation and  
36 during activities such as field trips and recordkeeping per state law.

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<sup>1</sup> TCA 49-50-1602 *et seq*; TRR/MS 0520-01-13-.03

<sup>2</sup> TCA 49-50-1602(d)(7)

<sup>3</sup> State Board of Education Policy 4.205; TRR/MS 0800-01-10

<sup>4</sup> TCA 49-50-1601

<sup>5</sup> TRR/MS 0520-01-13; State Board of Education Policy 4.205