



ALEDO ISD ADMINISTRATIVE REGULATION

Board Policy: FFAC

Administrative Approval Date: June 16, 2022

Effective Start Date: June 16, 2022

TOPIC: MEDICATION ADMINISTRATION

Administration of medication to students will be strictly governed by FFAC(LEGAL), FFAC(LOCAL), FFAF(LEGAL), FFAF(LOCAL), any related procedures, and the following:

1. Only school administrators may assign to trained District employees the task of administering medication by any mode, including injectable medication, oral medication, inhalants, topical medication, or rectally administered medication. Only authorized and appropriately trained District employees may administer medication to students.
2. District employees authorized to administer medication will be provided orientation, instruction, and supervised practice appropriate to the task. The school nurse will explain to the principal or designated building administrator; employees authorized to administer medication; and, as applicable, the student's teachers any adverse side effects of the medication and the recommended action to be taken.
3. Medication for a specific student will be provided and brought to school by the parent of the student. Students will not carry medication or administer it to themselves unless authorized by their physician and permitted by state law to self-carry and self-administer. The physician must provide to the campus written documentation for the student to self-carry and self-administer. [See FFAC(LEGAL) and FFAF]
4. The principal or designee will appoint one employee, such as the school nurse, to supervise the storing and administering of medications and to maintain records of the administration of medication. Any District employee administering medication to a student must record each dose given on a medication administration record. Records will also include the parent's written request.
5. The principal will provide locked storage space where all medication may be maintained apart from office supplies, stored at the appropriate temperatures, and accessible only to authorized employees.
6. Each student's medication must have the original pharmacy label, including the student's name, the name of the medication, directions concerning dosage, and the schedule for administration.
7. Unless a shorter duration is specified, all parent requests or permissions for the District to administer medication will expire at the end of each school year and new requests or permissions must be reviewed prior to the beginning of each school year. Renewed, written permission for treatment will be required from both the physician and the parent for each new school year.

8. Hypodermic injections may be administered by a school nurse, if available, when the parental request also includes the prescribing physician's request. The physician's request must include detailed information concerning the administration of the medication, as well as follow-up procedures. The student's parent will be instructed to furnish sterile, disposable syringes and needles. Used syringes and needles will be disposed of in accordance with rules of disposal of sharp instruments.
9. When the course of treatment is complete, or at the end of the school year, the parent will be asked to pick up any medication within a specified amount of time. The District will dispose of any unclaimed medication.
10. The Superintendent or designee may approve additional procedures concerning the handling, storing, administering, transporting, and disposing of medication in accordance with law and policy.
11. If any person has incorrectly administered a medication to a student, this person must immediately contact emergency medical services, the campus principal, and the school nurse.



ALEDO INDEPENDENT SCHOOL DISTRICT Medication Request Form

Administration of Medication at School: The only medication given at school will be that which is necessary to enable a student to remain in school. If possible, all medication should be given outside school hours. If necessary, medication will be given at school under the following conditions:

All medicines must be kept in the Nurse office. Students may not carry medications, except for inhalers or Epi-Pens with written physician's orders.

- A Medication Request Form must accompany each medication. Forms are kept in the front office and Nurse's office. • **Non-prescription medications:** must be in the original container and labeled with the student's name. Only bottles of 100 count or LESS will be accepted due to limited storage space. OTC medications will not be given more than 3 days in a row without physician orders.
- **Prescription medications:** must be in original, properly labeled container. Pharmacies can supply two (2) bottles for this purpose. Medication sent in baggies or unlabeled containers will not be given. Narcotics will not be given at school. Prescription medications will not be given without specific written request signed by both parent/legal guardian and the physician. The request should be made on the appropriate form supplied by AISD or the physician.
- Inhalers: The physician must specify on the medication request form if a student must carry an inhaler with them. A second inhaler must be kept in the nurse office for emergencies. If a student does not follow physician's orders, the privilege will be revoked.
- Three (3) times a day medication: should be given at home before school, after school, and bedtime. Example: antibiotics • No vitamins, food supplements, or products containing aspirin will be given at school. Example: Excedrin Migraine • Empty medication containers will be given to the student to take home for refills. Medication brought to school must be given to the nurse upon arrival in the morning. No medications may be carried on the bus.
- Medications must be picked up at the end of the school year or it will be destroyed.

Student _____ Date ___/___/___ Grade _____

Physician _____ Phone _____

Physician's Signature: _____

(Required for Prescription medication administration)

I hereby request that the medication specified above be administered to the student named and I release Aledo ISD from any liability.

Parent/Legal Guardian Signature: _____ Phone _____

Medication Name	Dose	Route	Time



DISTRITO ESCOLAR INDEPENDIENTE ALEDO

Formulario Para Administración de Medicamentos

Administración de Medicamentos en la escuela: Los únicos medicamentos que pueden administrarse dentro de la escuela serán aquellos necesarios para facilitar que el estudiante siga dentro de la escuela. De ser posible, de todos los medicamentos fuera del horario escolar. Si es necesario que se administren medicamentos en la escuela, se hará bajo las siguientes condiciones:

- **Todas las medicinas deben guardarse en la oficina de la enfermera.** Los estudiantes no pueden traer medicamentos, excepto por inhaladores o Epi-Pens con receta médica.
- Un formulario para administración de medicamentos debe acompañar a cada medicamento. Los formularios están en el escritorio de la oficina de la enfermera.
- **Medicamentos sin receta:** Deben estar en su paquete original y marcados con el nombre del estudiante. Solo se aceptan botellas de 100 o menor cantidad, debido al poco espacio. Medicamentos OTC no se dará más de 3 días en una fila sin órdenes del médico.
- **Medicamentos con receta:** debe ser el original, envase apropiadamente señalado. Las farmacias le pueden dar dos (2) botellas con este propósito. No se administrarán los medicamentos que manden en bolsitas o sin marcar. No se administrarán Narcóticos en la escuela. Medicamentos con receta no serán administrados sin la debida petición por escrito tanto por los padres/tutores, como por su Doctor. Esta petición deberá hacerse a través del formulario proporcionado por AISD o por su Doctor.
- Inhaladores: El doctor debe especificar en el formulario para administración de medicamentos, si el estudiante lo debe llevar consigo. Un segundo inhalador puede guardarse en la oficina de la enfermera solo en caso de emergencia. Si el estudiante no sigue las ordenes del Doctor, este privilegio le será revocado.
- Medicamentos por tres (3) veces al día. Deberán darse en la casa antes de la escuela, después de la escuela y a la hora de dormir. Por ejemplo: antibióticos.
- Ni vitaminas, suplementos alimenticios o productos que contengan aspirinas se darán dentro de la escuela. Ejemplo: Excedrin Migraine
- Los envases vacíos de medicinas, se le devolverán a los estudiantes para relleno. Los medicamentos que traiga a la escuela se le deberán entregar a la enfermera en la mañana. No pueden cargarse medicamentos en el autobús. • Debe recoger los medicamentos al final del año escolar o serán destruidos.

Estudiante _____ Fecha __/__/__ Grado _____

Doctor _____ Teléfono _____

Firma del Doctor: _____

(Requerido para la administración de medicamentos con receta)

Yo, por la presente; pido que el medicamento señalado sea administrado al estudiante mencionado y libero a de cualquier responsabilidad.

Firma Padre/Tutor: _____ Teléfono _____

Nombre Medicamento	Dosis	Modo de administrar	Hora

