

# ADMINISTRATION OF MEDICATIONS

## Guidelines:

These guidelines should be used in the administration of any medication. They should also be used as the basis for supervision of non-medical and/or unlicensed health personnel who are administering medication. Please see the Medication Authorization Form.

1. Wash hands before and after administering medications.
2. Compare labeled medication container with written order.
3. Read label three times—when taking it from the storage area, before giving it to the student, before returning it to the storage area.
4. Check expiration date on label.
5. Check student's identity with name on label. Ask him to tell you his name; don't say "Are you Johnny Smith?"
6. Give the prescribed dose, using the prescribed route (i.e. by mouth), and at the prescribed time. It is best to be able to observe the child as he takes the medication.
7. Record medications given on the medication log, and initial each time.
8. Relock the storage area.

## Safety Procedures:

1. Medications taken by students at school should be taken under the direct supervision of the designated staff member, and logged immediately on the medication log.
2. Everything possible should be done to minimize distractions when medications are being given, as distractions can cause errors to be made.
3. When administering medications remember the:

### **4. Five Rights of Medication Administration**

- Right Student
  - Right Medication
  - Right Dose
  - Right Time
  - Right Route
5. All medications should be periodically assessed for expiration. Parents should be notified, and medications should not be sent home with students.
  6. Under no circumstances should a medication be given in a different way than that written on the authorization form.
  7. Some medications need to be given either with food, or on an empty stomach, so timing is always important.
  8. Medications should be labeled if special storage is needed (i.e. dark, or refrigeration).
  9. Allergic reactions and other side effects can occur even after the child has been taking the medication for a while. If any side effect such as a rash, dizziness, cough, or breathing difficulty occurs, do not give another dose, and call the parents immediately. If there is significant or increasing breathing difficulty, **911 may need to be called.**

## **Administration Procedures:**

**These procedures should be followed for both prescription and non-prescription medications.**

### **1. Oral Medication**

- Student should be sitting or standing.
- Pour the tablet from the bottle into the lid of the container, and then into the medicine cup or the child's hand. Avoid touching the tablet yourself.
- Pour liquid medicine by setting the medicine cup on a firm surface at eye level, and pouring to the prescribed level, reading the fluid level carefully. Place the lid upside down on the table to avoid contamination. Wipe the bottle off with a tissue or clean cloth before replacing the cap.
- Unless contraindicated, offer a fresh cup of water to aid in swallowing.
- Make sure the student swallows the medication.
- Return medication to the cabinet or refrigerator. Lock cabinet.
- Record the medication on the log.
- Observe the student for any immediate medication reaction or side effect.

### **2. Topical medications (ointments and creams)**

- Gather necessary equipment including gloves or tongue blade as needed.
- Squeeze medication from the tube, or using tongue blade, take ointment from jar.
- Spread a small quantity of the medication, using a tongue blade, in a thin layer on the skin or on a bandage to be placed on the skin.
- If ordered, protect the skin surface with a dressing, and use tape or gauze to secure in place.
- Remove gloves and wash hands.
- Return medication to storage cabinet.
- Record the medication on the log.
- Observe the student for any immediate medication reaction or side effect.

### **3. Eye medications**

#### **Eye drops**

- Explain procedure to student.
- Clinic personnel and child should both wash hands.
- Give student tissue for wiping off excess medicine.
- Have student tilt head back and look up.
- Measure the correct amount in the dropper.
- You can have the child keep his eyes closed and drop the medicine in the inner corner of his eye (one at a time). Then, keeping his head back, have child open his eyes slowly, and the medicine will go in.
- Or you can gently pull the lower lid down, and instill the drops in this space.
- If more than one drop is needed, it is usually best to do one drop at a time in each eye to be treated, then go back and give the second drop in the same way.
- Repeat the procedure if the drop falls to the cheek.
- Remove excess medicine with clean tissue, but ask student not to rub his eyes.
- Wash hands.
- Return medication to storage area.
- Record the medication on the log.
- Observe the student for any immediate medication reaction or side effect.

**Eye ointment-same as above except:**

- Gently pull lower lid down, and have student look up.
- Apply eye medicine along the inside edge of the lower eyelid.
- Have child close his eyes, and not rub them.

**4. Ear drops**

- Have the student lie down on his side, with the ear to be treated “up.”
- Fill medication dropper with prescribed amount of medication.
- Gently lift the ear upward and outward.
- Instill drops, holding dropper near the ear canal.
- Have student lie on that side for 1-2 minutes to allow drops to flow down the ear canal.
- Wash hands.
- Return medication to storage area.
- Record the medication on the log.
- Observe the student for any immediate medication reaction or side effect.

**5. Nose drops**

- Student may be lying on his back or be sitting up, with head tilted back.
- Fill dropper with prescribed amount of medication.
- Place dropper just inside the nostril and instill correct number of drops.
- Repeat procedure in other nostril.
- Instruct student to keep head tilted back, and not rub the nose for 3-5 minutes.
- **Nasal sprays** can be instilled with the child sitting up. Spray or squeeze the prescribed number of times, instructing the child to gently and slowly breathe in through his nose each time. Repeat on the other nostril.
- Wash hands.
- Return medication to storage area.
- Record the medication on the log.
- Observe the student for any immediate medication reaction or side effect.

**6. Inhalers (with and without spacers)**

**Metered dose inhaler (MDI) with spacer (aerochamber)**—Children using inhalers should have been taught to use them properly, but still should be monitored to make sure they are not leaving steps out.

- Have the child sit up straight, or stand to use the MDI.
- Remove the caps from the spacer and inhaler.
- Shake the inhaler well (for about two seconds).
- Attach the inhaler to the spacer.
- Have the child exhale (breathe out).
- Have the child place the mouthpiece of the spacer in his mouth.
- Press the inhaler to spray the medicine into the spacer.
- Take a deep breath from the spacer, hold it for a count of 10, and then exhale.
- Younger children may need to take another deep breath from the spacer, hold it, and then exhale, in order to get all of the medication.
- If two “puffs” are ordered, wait one minute, then repeat the above steps from “Press the inhaler”.

- Wash hands.
- Return medication to storage area.
- Record the medication on the log.
- Observe the student for any immediate medication reaction or side effect.

**Metered dose inhaler without spacer**

- Remove cap from mouthpiece.
- Shake inhaler well before use (at least two seconds).
- Breathe out completely.
- Hold inhaler in upright position with mouthpiece directly in front of the mouth, about two finger widths away from the mouth.
- Open mouth and press top of inhaler firmly to release medicine. At the same time, take a deep breath in and hold it for a count of 10.
- Exhale.
- Wait 1-2 minutes before taking a second puff, if ordered.
- Wash hands.
- Return medication to storage area.
- Record the medication on the log.
- Observe the student for any immediate medication reaction or side effect.

## MEDICATION ERRORS

Even the most experienced health care providers can make medication errors. Following the safety guidelines listed above will minimize chance of errors. Being distracted by other duties while giving medications is probably the easiest way this happens in schools. Medication errors can include: an overdose of the right medication, an underdose of the right medication, giving the wrong medication, giving a medication at the wrong time or in the wrong way.

Whenever an error in medication administration is recognized or discovered, the following steps must be taken:

1. Keep the student in the health room; or, if the student has already returned to class, have the student accompanied back to the office or clinic.
2. Ask the student how he is feeling- if he has any feelings of stomach upset, dizziness, itching, or any other symptoms.
3. Identify the incorrect dose or type of medication taken by the student.
4. Notify parents.
5. Immediately notify the principal and cluster/school nurse of the error. If an underdose was given, the remainder of the dose may either be omitted or administered, following medical advice received from parent, physician or school nurse.
6. If unable to reach the parents, or child's physician, notify the Georgia Poison Control Center (**404-616-9000**) for instructions. They will help you determine if further actions need to be taken.
7. Carefully record, on the student's health record, all circumstances and actions taken, as well as the student's current status.
8. An incident report should be completed within 24 hours and submitted to the principal. Include the name of the student, parent name and phone number, and a specific statement of what the medication error was, who was notified, and what remedial actions were taken.
9. Notify Student Health Services and/or your Cluster/School Nurse.

## **REMINDERS FOR NON-NURSING STAFF WHEN GIVING MEDICATION AT SCHOOL**

Non-nursing personnel who are expected to assist students receiving medication at school should have in-service training regarding county policy and procedures for administering medication.

These are important reminders for all staff designated by the principal to assist students with medication.

1. All drugs have the potential for causing side effects. Observe the student's response to medication, and report to parents and supervisor any changes in behavior or awareness, rash complaints, or anything else that may possibly be related.
2. Give medication exactly as ordered by the health care provider and written on the authorization form. Check the authorization form for possible side effects to look for.
3. Familiarize yourself thoroughly with the guidelines for administration of medications.
4. Encourage the student to drink a full glass of water after oral medications, unless otherwise ordered.
5. A "no-show" is not acceptable, especially for seizure medication and antibiotics. A child should be called down, if he does not come at the right time.
6. If a child develops a rash, do not give the next dose of medication until you have contacted the parent, and they have contacted the health care provider.
7. Check storage requirements on the label of the medication. Most medications need to be stored in a cool, dry place; some need refrigeration. If medication needs to be stored in the refrigerator, it should be one that is not available to students. Medications should be in a separate container, away from food and nourishments.
8. Before giving medication, check the name of the student, the name of the medication, and the dosage three times:
  - When taking it from the storage area
  - Before giving it to the student
  - When charting the dose given and returning it to the storage area
9. **Never** use one child's medication for another child.
10. Avoid distractions while giving medications.
11. Immediately after giving medications, document what was done on the log. It will be hard, if not impossible to remember later.
12. If a medication error is made, follow procedures for notification, and document the occurrence.

Dear Parent/ Guardian: (Sample Letter)

As the school staff works with you this year, we need your assistance and cooperation in preparing for the possibility that your child might need to take medication, become ill, or have an accident during school hours. We hope this letter will explain our procedures.

#### Emergency Information

Emergency contact information should be updated annually by sending the information to the school or calling the school office. When you receive a Student Contact Form, please update it and return it to the school within five (5) days. Current, accurate information will enable us to contact you. If any information changes during the school year, contact the school immediately.

#### Prescription/Non-Prescription Medication

Medication time schedules should be set so that, when possible, medicine is taken at home rather than at school. However, if medication must be taken at school, the following procedures apply.

1. Medication Authorization Form – The parent/legal guardian must complete an authorization and instruction form entitled “Authorization to Give Medication At School.” For prescription medication your physician must also sign the form. A copy of this form is on the back of this letter. You can make copies yourself or request additional forms from the school. ***The completed form must accompany the medication, so be sure to take this form to your physician whenever your child is ill.***
2. The medicine, in the original container (along with authorization form), must be taken to the school office/clinic for central storage. The parent/guardian should take the medication to school; however, if this is not possible, your child should be instructed to take the medication and the authorization form directly to the school office/clinic. Under no circumstances should medication be shown or shared with other students.
3. At the designated time, the student will go to the office/ clinic to take the medication. Assistance/ supervision will be given in accordance with the instructions on the authorization form. Medication is a parental responsibility; school employees will not assume any liability for supervising or assisting in the administration of medication.
4. Unused medication should be retrieved from the school office/ clinic within one week after medication is discontinued; otherwise the school will dispose of the medication.
5. Medication is a parental responsibility; school employees will not assume any liability for supervising or assisting in the administration of medication.

#### Student Illness/ Injury

Sick students who are contagious must not be sent to school. When a student becomes ill at school, the parent must arrange for the student to be taken home.

By working together, we can strive to ensure the health and well being of every student so that he/she can benefit from the educational program.

# DAILY MEDICATION LOG

SCHOOL \_\_\_\_\_ DATE \_\_\_\_\_

STUDENT'S NAME	MEDICATION	DOSE	TIME	INITIALS
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Initials/Signatures

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## DISPOSAL OF MEDICATION(S) NOTIFICATION LETTER

Dear Parent:

Your child \_\_\_\_\_ has unused medication(s) in the school office/clinic. Please provide instructions as to what you would like us to do with it.

I will pick it up at school.

\_\_\_\_\_  
Signature

I authorize the school to dispose of the medication.

\_\_\_\_\_  
Signature

**PLEASE RETURN THIS FORM TO THE SCHOOL OFFICE/ CLINIC**



## INFECTION CONTROL IN THE SCHOOL

Schools, by their very nature, can be considered natural incubators for many viral and bacterial infections. Young school-age children are still developing their immune systems, and are more vulnerable to common infections. Children's natural affinity for each other and school activities promoting the values of sharing, cooperation and collaboration can also add to the potential spread of infections among students and staff.

Hand washing is the single most important activity to decrease the spread of infections of all kinds. Studies have shown that school attendance, and therefore school success, can be positively affected by diligent attention to hand washing. The three necessary requirements for an effective program are:

- Accessible hand washing facility (preferably with warm water, soap and paper towels).
- Students and staff taking/being allowed the time to wash their hands several times during the day (especially before lunch and snacks, after outside activities, after bathroom breaks).
- Discussion in class of proper methods of hand washing—using friction, washing all hand surfaces and nails, rinsing and drying well.

Communication with parents is also very important. When there are outbreaks of illnesses in classes or groups, letters should be sent home. ***Please contact your cluster/school nurse and Student Health Services for instructions and guidance.*** Parents should, of course, be notified when a child becomes ill at school, and assisted with referrals if health care is not readily available to the family. Teachers and clinic personnel should be alert to patterns of illness that may emerge. Clinic personnel can help by giving reminders in staff meetings, doing bulletin boards to teach children, and being a good role model for children and other staff.

One of the goals of student health services is to assist the child in maintaining a level of health that enables him to learn. Attention to infection control by all school employees will help us to reach that goal for all students.