

Riverside County Special Education Local Plan Area

Provision of Healthcare Services Guidance

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PROVISION OF NURSING SERVICES

ADMINISTERING MEDICATION AND MONITORING HEALTH SERVICES

REFERENCES

CALIFORNIA DEPARTMENT OF EDUCATION (CDE) K.C. SETTLEMENT AGREEMENT AND LEGAL ADVISORY

AMERICAN NURSES ASSOCIATION V. TORLAKSON 57 CAL. 4th 570

EXAMPLE MEDICATION AUTHORIZATION FORM

Introduction

The Local Educational Agency (LEA) shall provide children within the Riverside County Special Education Local Plan Area (SELPA) who require health care services during the course of their school day, which are necessary for them to regularly attend and benefit from the instructional program, specified services pursuant to the Individualized Educational Plan (IEP).

Health and nursing services are considered a "related service" if they are necessary in order for the child to benefit from their specialized academic instruction. The need for these services is discussed and reviewed during the Individualized Education Program (IEP) meeting. At that time, a health plan for the child is developed and becomes a permanent part of the child's IEP.

Provision of Nursing Services

Federal Law

The Individuals with Disabilities Education Act (IDEA) of 2004 ensures that all children have available to them a free appropriate public education (FAPE). The law emphasizes special education and related services designed to meet their unique needs, to assure the rights of children with disabilities and their parents or guardians are protected, and to assess and assure the effectiveness of efforts to educate children with disabilities. School health service(s) is a related service.

Federal regulations provide further distinction between "school health services," which are provided by a "qualified school nurse or other qualified person," and "medical services," which are provided by a licensed physician. (*Title 34 of the Code of Federal Regulations § 300.34 (a)* (c)(5)(13)).

Definition

Children who need school health services require special health care procedures for life support or health support during the school day in order to be able to benefit from the educational program.

Procedure for Developing the IEP of a Child with Specialized Health Care Needs

If a child is eligible for special education, the health plan is a part of the IEP process. The IEP team (including a nurse knowledgeable about the child's health care needs) is convened to discuss safe and appropriate classroom placement, as well as necessary services and personnel for the child to attend school in the least restrictive environment (LRE). The issues addressed may include:

- Child's medical condition and needs;
- Procedure(s) required during the school day;
- How the need is currently being met;
- What records are kept;
- What level of personnel is required to perform necessary procedures;
- What level of supervision is needed;
- What is the educational impact; and
- Where should the educational placement be.

The information from this meeting is developed into a health plan that is a part of the IEP of a child who is eligible for special education services.

The school nurse is legally responsible for supervision/provision of nursing procedures performed during the school day. They can delegate that responsibility by training licensed nursing staff or unlicensed assistive personnel as deemed appropriate. All staff having contact with the child should be informed about the child's needs and given training for services appropriate for them to provide. Review of training and care given should be evaluated regularly as needs change and information and technology is updated.

There may be private nursing services that have been prescribed by a physician. During a transition period, a nurse from a private agency, who is supported by private insurance or other non-school funds, may provide nursing services with district and parental consent. This transition period allows school personnel to be trained in the procedure that is needed. Private nurses on a school campus follow the same requirements as school volunteers, including providing the school/LEA with current fingerprint clearance, certificate of negative tuberculosis, and emergency information. In addition, the private nurse should provide certification information and the name and address of their employer of record. Use of a private nurse is determined on a case by case basis and must follow all LEA guidelines.

Transportation

Each LEA provides transportation as a related service if the child with a disability requires this service in order to receive special education.

Transportation issues are addressed on the child's IEP and may become a part of the health plan if school health services are required on the bus.

In addition to health care services, other services may be determined to be necessary for the child to benefit from the instructional program. These services, if determined by the IEP team to be appropriate and necessary, are defined within the child's IEP. Please see the <u>Riverside County</u> <u>SELPA Special Education Transportation Guidelines</u> for more information.

Administering Medication and Monitoring Health Condition

Other designated school personnel may include any individual employed by the LEA who has consented to administer the medication or otherwise assist the child, and who may legally administer the medication (*Title 5 of the California Code of Regulations § 601 (e)(1-2);California Education Code § 49423*).

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 (*Title 5 of the California Code of Regulations §* 601(b); California Education Code § 49423).

Additionally, federal and state law prohibit LEAs from requiring a child to obtain a prescription for a substance covered by the Controlled Substance Act, as a condition of attending school, receiving an evaluation, or receiving services (*Title 20 of the United States Code § 1412(a)(25)*).

Title 20 of the United States Code § 1412(a)(25). Prohibition on Mandatory Medication. (A) In general. The State educational agency shall prohibit State and local educational agency personnel from requiring a child to obtain a prescription for a

substance covered by the Controlled Substance Act (21 U.S.C. 801 et seq.) as a condition of attending school, receiving an evaluation under subsection (a) or (c) of section 1414 of this title, or receiving services under this chapter.

California Education Code § 56040.5. State and local educational agency personnel are

prohibited, pursuant to paragraph (25) of subsection (a) of Section 1412 of Title 20 of the United States Code, from requiring an individual with exceptional needs to obtain a prescription for a medication that is a substance covered by the Controlled Substances Act (21 U.S.C. Sec. 801 et seq.) as a condition of attending school, receiving an assessment under subsection (a) or (c) of Section 1414 of Title 20 of the United States Code, or receiving services under this part.

Persons Authorized to Administer Medication at School

Based on *California Education Code* §§ 44871 - 44878, 49400, 49422(*a*), and 49423; *Title 5* of the California Code of Regulations §§ 600, 601(e)(f)(h) and 604, it is recommended that medication be administered at school by the school nurse, other duly qualified supervisors of health, site administrator or designee as allowed by law, the parent/guardian or their designee as allowed by law or LEA policy, a contracted licensed health care professional whose licensure permits administration of the medication, or by the child under specified conditions.

Requirements for Medication at School

In order for a pupil to be assisted by a school nurse or other designated school personnel, the school district shall obtain both a written statement from the licensed medical provider detailing:

- 1. the name of the medication,
- 2. method,
- 3. amount, and
- 4. time schedules by which the medication is to be taken and
- 5. another written statement from the parent, foster parent, or guardian of the pupil indicating the desire that the school district assist the pupil in the matters set forth in the statement of the licensed medical provider.

The written statements shall be provided at least annually and more frequently if the medication, dosage, frequency of administration or reason for administration changes. (*California Education Code* § 49423 (3))

"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 (Title 5 of California Code or Regulations §601 (b))

Self Administration of Medication at School

Based on *California Education Code § 49423: and Title 5 of the California Code of Regulations § 605*, Any pupil who is required to take, during the regular schoolday, medication prescribed for him or her by a licensed medical provider may be assisted by the school nurse or other designated school personnel or may carry and self-administer prescription auto-injectable epinephrine and/or inhaled asthma medication if the school district receives the appropriate written statements.

In order for a pupil to carry and self-administer prescription auto-injectable epinephrine and/or inhaled asthma medication, the school district shall obtain both a written statement from the licensed medical provider detailing:

- 1. the name of the medication,
- 2. method,
- 3. amount, and
- 4. time schedules by which the medication is to be taken, and
- 5. confirming that the pupil is able to self-administer inhaled asthma medication, and
- 6. a written statement from the parent, foster parent, or guardian of the pupil consenting to the self-administration,
 - a. providing a release for the school nurse or other designated school personnel to consult with the health care provider of the pupil regarding any questions that may arise with regard to the medication, and
 - b. releasing the school district and school personnel from civil liability if the self-administering pupil suffers an adverse reaction by taking medication pursuant to this section.

A pupil may be subject to disciplinary action pursuant to section 48900 if that pupil uses auto-injectable epinephrine or inhaled asthma medication in a manner other than as prescribed (*California Education Code § 49423 (c)*)

Notifications to Parents/Guardians

At the beginning of each school year, the LEA shall notify parent/guardian that children who need to take prescribed medication during the school day may be assisted by a school nurse or designated school personnel, or allowed to self-administer certain medications as long as the LEA receives written statements from the child's physician and parent/guardian in accordance with law, Board policy and administrative regulation (*California Education Code §§ 48980, 49423*).

The LEA shall inform the parent/guardian of any child on a continuing medication regimen for a non-episodic condition of the following requirements (*California 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 licensed medical provider ; and

2. With the parent/guardian's written consent, the school nurse or other designated employee may communicate with the child's licensed medical provider regarding the medication and its effect, and may counsel school personnel regarding the possible effects of the medication on the child's physical, intellectual and social behavior, as well as possible behavioral signs and symptoms of adverse side effects, omission, or overdose.

Parent/Guardian Responsibilities

Before a designated employee administers or assists in the administration of any prescribed medication to any child, or any child is allowed to carry and self-administer prescription autoinjectable epinephrine or prescription inhaled asthma medication during school hours, the LEA shall have a written statement from the child's licensed medical provider and a written statement from the child's parent/guardian (*California Education Code §§ 49414.5, 49423, 49423.1; Title 5 of the California Code of Regulations § 600*).

The licensed medical provider's written statement shall clearly (*California Education Code §§* 49423, 49423.1; Title 5 of the California Code of Regulations § 602):

- 1. Identify the child;
- 2. Identify the medication;

3. Specify the method, amount, and time schedules by which the medication is to be taken;

4. Contain the name, address, telephone number, and signature of the physician; and

5. If a parent/guardian has requested that his/her child be allowed to self-administer prescription auto-injectable epinephrine or prescription inhaled asthma medication, confirm that the child is able to self-administer the medication.

The parent/guardian's written statement shall:

1. Identify the child;

2. Grant permission for the authorized LEA representative to communicate directly with the child's physician, as may be necessary, regarding the physician's written statement or any other questions that may arise with regard to the medication;

3. Contain an acknowledgement that the parent/guardian understands how LEA employees will administer or otherwise assist the child in the administration of medication;

4. Contain an acknowledgement that the parent/guardian understands his/her responsibilities to enable LEA employees to administer or otherwise assist the child in the administration of medication including, but not limited to, the parent/guardian's responsibility to provide a written statement from the physician and 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

5. Contain an acknowledgement that the parent/guardian may terminate consent for such administration at any time.

If a parent/guardian has requested that his/her child be allowed to carry and self-administer prescription auto-injectable epinephrine or prescription inhaled asthma medication, the parent/guardian's written statement shall also (*California Education Code §§ 49423, 49423.1*):

1. Consent to the self-administration; and

2. Release the LEA and school personnel from civil liability if a child suffers an adverse reaction as a result of self-administering the medication.

The parent/guardian shall annually provide the LEA a new written statement from himself/herself and the child's physician. In addition, the parent/guardian shall provide a new prescriber's statement if the medication, dosage, frequency of administration, or reason for administration changes (*California Education Code §§ 49423, 49423.1*).

The parent/guardian shall provide medications in a properly labeled, original container along with the instructions from the licensed medical provider. For prescribed medication, the container shall bear the name and telephone number of the pharmacy, the child's identification, name and phone number of the prescriber, and the prescriber's instructions. Medications that are not in their original container shall not be accepted or administered. Medications shall be delivered to the school by the parent/guardian, unless the LEA authorizes another method of delivery.

The parent/guardian of a child on a continuing medication regimen for a non-episodic condition shall inform the school nurse or other designated certificated employee of the medication being taken, the current dosage, and the name of the licensed medical provider. (*California Education Code § 49480*).

LEA Responsibilities

The school nurse or other designated school personnel may, according to their LEA guidance:

1. Administer or assist in administering the medication in accordance with the licensed medical provider's written statement;

2. Accept delivery of medication from the child's parent/guardian, including counting and recording the medication upon receipt;

3. Maintain a list of children needing medication during the school day, including the type of medication, times and dosage, as well as a list of children who are authorized to self- administer medication;

4. Maintain a medication log documenting the administration of medication including the child's name; name of medication the child is required to take; dose of medication; method by which the child is required to take the medication; time the medication is to be taken during the regular school day; date(s) on which the child is required to take the medication; prescriber's name and contact information; and a space for daily recording of medication administration (*Title 5 of the California Code of Regulations § 601 (c)(1-8) and California Education Code § 49423*).

The daily record, as determined by the LEA, may contain the date, time, amount of medication administered, and signature of the individual administering the medication;

5. Maintain a medication record including 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 child (*Title 5 of the California Code of Regulations § 601 (d)(1-4)*);

6. Ensure that student confidentiality is appropriately maintained;

- 7. Coordinate the administration of medication during field trips and after-school activities;
- 8. Report any refusal of a child to take his/her medication to the parent/guardian;

9. Keep all medications to be administered by the LEA in a locked drawer or cabinet;

10. Communicate with the prescriber regarding the medication and its effects;

11. Counsel school personnel regarding the possible effects of the medication on the child's physical, intellectual and social behavior, as well as possible behavioral signs and symptoms of adverse side effects, omission, or overdose; and

12. By the end of the school year, ensure that unused, discontinued, and outdated medication is returned to the child's parent/guardian where possible or, if the medication cannot be returned, is disposed of in accordance with state laws and local ordinances.

Delivery and Storage of Medication

According to *Title 5 of the California Code of Regulations § 606*, A local education agency may establish policies governing the delivery of medication to the school site (other than medication a pupil is allowed to carry for purposes of self-administration), as well as the storage of medication in a manner that is secure and maintains the medication's effectiveness. (*California Education Code § 33031 49423 and 49423.6*)

Prohibition on Mandatory Medication

On December 3, 2004, President Bush signed the "Prohibition on Mandatory Medication Amendment as part of the reauthorization of the Individuals with Disabilities Education Act. 300.174 Prohibition on mandatory medication. As a result of this amendment, the Riverside County SELPA and it's LEAs comply with the prohibition on mandatory medication.

The amendment reads:

(a) General. The SEA must prohibit State and LEA personnel from requiring parents to obtain a prescription for substances identified under schedules I, II, III, IV, or V in section 202(c) of the Controlled Substances Act (21 U.S.C. 812(c)) for a child as a condition of attending school, receiving an evaluation under §§300.300 through 300.311, or receiving services under this part.

(b) Rule of construction. Nothing in paragraph (a) of this section shall be construed to create a Federal prohibition against teachers and other school personnel consulting or sharing classroom-based observations with parents or guardians regarding a student's academic and functional performance, or behavior in the classroom or school, or regarding the need for evaluation for special education or related services under §300.111 (related to child find).

PROHIBITION ON MANDATORY MEDICINE

It shall be the policy of the Riverside County SELPA to prohibit school personnel from requiring a student to obtain a prescription for a substance covered by the Control Substance Act as a condition of attending school or receiving a special education assessment and/or services. (20 USC Section 1412 (a)(25))

References

- California Department of Education (CDE) K.C. Settlement Agreement and Legal Advisory
- <u>American Nurses Association v. Torlakson 57 Cal. 4th 570</u> (PDF)

Based on the decision from American Nurses Association V. Torlakson, California law does permit trained, unlicensed school personnel to administer prescription medications, including insulin, in accordance with written statements of individual students' treating physicians, with parental consent (Ed. Code, §§ 49423, 49423.6; tit. 5, §§ 600-611),

Because schools may administer prescription medications only in accordance with physicians' written statements (§ 49423; tit. 5, § 600, subd. (a)), state law in effect delegates to each student's physician the decision whether insulin may safely and appropriately be administered by unlicensed school personnel or instead whether a particular student's medical needs can be met only by a licensed healthcare provider. State law, however, presents no categorical obstacle to the use of unlicensed personnel for this purpose.

AUTHORIZATION FOR PRESCRIBED AND OVER THE COUNTER MEDICATION ADMINISTRATION AT SCHOOLS WITHIN THE COUNTY OF RIVERSIDE

Name of Student	Date of Birth	Grade	School	
ай.	V2. V			1

Education code 49423 authorizes that any pupil who is required to take, during the regular school day, medication prescribed for him/her by a physician, may be assisted by the school nurse or other designated personnel if the school district receives (1) a written statement from such physician detailing the method, amount, and time schedules by which such medication is to be taken and (2) a written statement from the parent/guardian of the pupil indicating the desire that the school district assist the pupil in the matter set forth in the physician's statement.

- If your physician would like your child to carry either an asthma inhaler or emergency medication (auto-injectable epinephrine, i.e. EpiPen). Part III must be completed by the doctor, parent and child.
- The parent or adult representative designated by the parent must bring all prescribed medications to school in its
 prescription-labeled container.
- Over-the-counter medications must be brought in an unopened container.
- All medications will be maintained in the Health Office with the exception of medications designated in Part III, as
 prescribed by the physician.
- Parent/guardian may pick up unused medications at the close of the school year. Medication remaining after the last day of school will be properly discarded.

PHYSICIAN AUTHORIZATION ONE MEDICATION PER FORM

L PRESCRIBED MEDICATION REQUIRED TO BE ADMINISTERED DURING SCHOOL HOURS (THIS SECTION IS TO BE COMPLETED BY PHYSICIAN)

Name of medication(s)	Health condition for which medication is prescribed
Time(s) to be taken	Dosage
Route of administration	Precaution-possible untoward reactions
Date to be discontinued	Special storage instructions
Name of physician (Please print)	Physician's telephone number Fax number
Physician's signature	Date

IL THIS SECTION IS TO BE COMPLETED BY PARENT/GUARDIAN. (PARTS I AND II MUST BE COMPLETED)

I give permission for my child to receive the ab- administrative regulations, and agree to release,		triet board policy and its
automitiente regannonit, and agree to researc,		(District)
board member, officers, agents & employees fir them for administering medication as set forth i		
and the School Nurse involved with	he exchange of pertinent medical information my child's medical care. asent for such administration of medication a	
Signature of Parent/Guardian:	Relationship:	Date:

NO MEDICATION WILL BE ADMINISTERED WITHOUT THE REQUIRED SIGNATURES.

THIS FORM MUST BE RENEWED AT THE BEGINNING OF EACH SCHOOL YEAR OR WHENEVER THERE IS A CHANGE IN MEDICATION OR INSTRUCTIONS. (Self-administered medication consent form is on Page 2)

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AUTHORIZATION AND PROTOCOL FOR SELF-ADMINISTERED MEDICATION WITHIN THE COUNTY OF RIVERSIDE

(PAGE 1 AND 2 MUST BE COMPLETED FOR SELF-ADMINISTERED MEDICATION)

Name of Student:	Date of Birth:	Grade:	School:	

In order for your child to carry a self-administered emergency medication on his/her person, the following must be understood and agreed upon by the student and parents:

The student may utilize the prescribed self-administered medication as needed and directed by his/her physician. The Doctor's signature indicates the student has been instructed on the proper use of the prescribed medication. The medication must be properly labeled with the student's name. Both the Authorization for Prescribed Medication form and this Protocol must be signed by the parent/guardian and placed on file at the school prior to your child carrying a self-administered medication on his/her person.

Inhaler: NO DIRECT MONITORING will be conducted by the school staff. The student is responsible for selfadministration of the inhaler. If the student continues having difficulty breathing, he/she should report to the health office and the parents will be notified by the appropriate school staff.

Self-administered emergency epinephrine; NO DIRECT MONITORING will be conducted by the school staff. The student is responsible for notifying school staff in the event he/she had the need to self-administer the emergency medication.

- It is the parents' responsibility to immediately notify the school if the child's health status changes, or when a change
 in physician and/or medication occurs. Changes in procedure must be received in writing from the physician
 authorizing treatment.
- The district is not responsible for any risk involved with improper handling of this medication including: overuse, improper administration, breakage, theft, loss, sharing, playing with or careless storage of the medication.
- Re-evaluation of the present protocol may be needed if the student is found to display behavior that increases the safety risks of him/herself or the students on campus.

III. PERMISSION TO CARRY AND SELF-ADMINISTER ASTHMA MEDICATION AND AUTO-INJECTABLE EPINEPHRINE (i.e. EpiPen)

TO BE COMPLETED BY THE PHYSICIAN: The above-name asthma inhaler/emergency medication. The child's well-being is in	
person. Therefore, I request that he/she be permitted to carry the as	
capable of self-administering the medication, understands the purp	pose, appropriate method, and frequency of use of the
asthma inhaler/emergency medication.	
PHYSICIAN'S SIGNATURE:	DATE:
PRINTED/TYPED NAME OF PHYSICIAN:	and the second s
TO BE COMPLETED BY THE PARENT/GUARDIAN:	I permit my child to carry the above-listed asthma
inhaler/emergency medication as ordered by his/her physician. I al	so specifically release the school district and all school
personnel from any and all civil liability if my child suffers an adve	
during school hours.	are reaction to a result of self building methods
PARENT/GUARDIAN SIGNATURE:	DATE
FARENT/GUARDIAN SIGNATURE.	DATE.
TO BE COMPLETED BY THE STUDENT. I have been instant	a dia dia mandri andi andi andi anili sala isan
TO BE COMPLETED BY THE STUDENT: I have been instruct	
prescribed to me by my physician. I understand that using my medic	
can result in disciplinary action taken against me by my School/Distri	
STUDENT'S SIGNATURE:	DATE:

Please return the fully completed forms to your child's school health office signed by the physician, parent/guardian, and student. Medication forms must be renewed at the beginning of each school year or whenever there is a change in medication or instructions.

NO MEDICATION WILL BE ALLOWED WITHOUT THE REQUIRED SIGNATURES.

AUTORIZACION PARA MEDICAMENTOS RECETADAS Y SIN RECETA ADMINISTRACION DE ESTAS EN LAS ESCUELAS DENTRO DEL CONDADO DE RIVERSIDE

Nombre del Estudiante	Fecha de Nacimiento	Grado	Escuela
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El Código de Educación 49423 autoriza que cualquier estudiante que requiera tomar medicamento recetado por un medico durante el día regular de clases, puede ser ayudado por una enfermera escolar o por otro personal designado si el distrito escolar recibe (1) una declaración por escrito de dicho medico detallando el método, cantidad y horario en que se debe tomar el medicamento y (2) una declaración por escrito de parte del padre/guardián del estudiante indicando el deseo de que el distrito escolar ayude al estudiante en el caso establecido en la declaración del médico.

- Si su medico quiere que su hijo/a traiga consigo ya sea un inhalador para el asma o medicamento de emergencia (auto-inyectable epinephrine, i.e. Epipen), El doctor, los padres y el estudiante, deben completar la Parte III del formulario.
- El Padre/madre o adulto representante designado por los padres debe traer todos los medicamentos recetados a la escuela en el envase de la farmacia etiquetado apropiadamente.
- El medicamento sin receta se debe traer en un envase sellado.
- Todos los medicamentos se mantendrán en la Oficina de Salud de la escuela con la excepción del medicamento designado en la Parte III, del formulario según recetado por el medico.
- El padre/guardián puede recoger el medicamento no usado al final del año escolar. Los medicamentos restantes después del último día de clases serán descartados apropiadamente.

PHYSICIAN AUTHORIZATION ONE MEDICATION PER FORM

I. PRESCRIBED MEDICATION REQUIRED TO BE ADMINISTERED DURING SCHOOL HOURS (ESTA SECCION DEBE SER COMPLETADA POR EL MEDICO) (THIS SECTION IS TO BE COMPLETED BY PHYSICIAN)

Name of medication(s)	Health condition for which medication is prescribed
Time(s) to be taken	Dosage
Route of administration	Precaution-possible untoward reactions
Date to be discontinued	Special storage instructions
Name of physician (Please print)	Physician's telephone number Fax number
Physician's signature	Date

II. ESTA SECCION DEBE SER COMPLETADA POR EL PADRE/GUARDIAN. (DEBEN COMPLETAR LAS PARTES I Y II)

Doy mi permiso para que mi hijo/a reciba el medicamento mencionado arriba en la escuela de acuerdo a la póliza de la Mesa Directiva del distrito y a los reglamentos administrativos, y estoy de acuerdo en mantener al School District a sus oficiales y empleados libres de toda responsabilidad o reclamo, que pueda surgir de estos arreglos.

- Estoy de acuerdo en permitir la comunicación e intercambio de información médica pertinente, entre el proveedor de servicios médicos y la Enfermera Escolar implicada en el cuidado medico de mi hijo/a.
- Entiendo que puedo, en cualquier momento, por escrito, terminar este consentimiento para dicha administración del medicamento.

Firma del Padre/Guardián:

Parentesco:

Fecha NO SE ADMINISTRARA NINGUN TIPO DE MEDICAMENTO SIN LAS FIRMAS REQUERIDAS.

DEBEN RENOVAR ESTE FORMULARIO AL PRINCIPIO DE CADA AÑO ESCOLAR O SIEMPRE QUE HAYA UN CAMBIO DE MEDICAMENTO O DE INSTRUCCIONES.

(El consentimiento para medicamento auto-administrado se encuentra en la Página 2)

AUTORIZACION Y PROTOCOLO PARA AUTOMEDICACIÓN DENTRO DEL CONDADO DE RIVERSIDE

(DEBE COMPLETARSE LA PÁGINA 1 Y 2 PARA LA AUTOMEDICACIÓN)

Nombre del Estudiante:	Fecha de Nacimiento:	Grado:	Escuela:
CONSIDER SAN PROVIDENCE CONSERVATION			

Para que su hijo/a pueda traer consigo un medicamento de emergencia para auto administrárselo, los padres y estudiante deben entender y estar de acuerdo con lo siguiente:

El estudiante podrá administrarse el medicamento según lo necesite de acuerdo a las instrucciones de su médico. Se entiende que el estudiante ha sido instruido en el uso apropiado del medicamento recetado. El medicamento debe estar apropiadamente etiquetado con el nombre del estudiante. Antes de que su hijo/a pueda traer consigo un medicamento para auto administraselo, *Tanto el formulario de Autorización para Medicamentos Recetados como este Protocolo* deben ser firmados por el padre/guardián y puesto en el expediente escolar.

Inhalador: No se conducirá ningún monitoreo directo por medio de los empleados escolares. El estudiante es responsable por la automedicación con el inhalador. Si el estudiante continúa teniendo dificultad para respirar, deberá dirigirse a la oficina de salud y el personal adecuado notificará a los padres.

Automedicación de Epiniphrine en caso de emergencia: No se conducirá ningún monitoreo directo por medio de los empleados escolares. El estudiante es responsable de la notificación a empleados escolares en el caso de que necesite auto administrarse la de emergencia.

- Es responsabilidad de los padres notificar inmediatamente a la escuela, si cambia el estado de salud del estudiante
 o cuando ocurra un cambio de médico y/o medicamento. Los cambios de procedimientos deberán ser recibidos
 por escrito de parte del médico que esté autorizando el tratamiento.
- El distrito no es responsable por ningún riesgo implicado con el manejo de este medicamento incluyendo: sobredosis, administración inapropiada, ruptura, robo, pérdida, compartir, jugar o el descuido en el almacenamiento del medicamento.
- Puede que sea necesario reevaluar este protocolo en caso de que se encuentre que el estudiante presenta una conducta que aumente los riesgos de seguridad para sí mismo o para otros estudiantes en la escuela.

III. PERMISO PARA TRAER CONSIGO Y AUTO-ADMINISTRARSE MEDICAMENTO PARA ASMA Y AUTO-INYECTARSE EPINEPHRINE (i.e.Epi-Pen)

TO BE COMPLETED BY THE PHYSICLAN: The above-named student has been instructed in the proper use of their asthma inhaler/emergency medication. The child's well-being is in jeopardy unless this medication is carried on his/her person. Therefore, I request that he/she be permitted to carry the asthma inhaler/emergency medication at school. He/she is capable of self-administering the medication, understands the purpose, appropriate method, and frequency of use of the asthma inhaler/emergency medication. PHYSICIAN'S SIGNATURE: DATE: PRINTED/TYPED NAME OF PHYSICLAN: COMPLETADO POR EL PADRE/GUARDIÁN: Permito que mi hijo/a traiga consigo el inhalador de emergencia para el asma según lo ordenado por su médico. También libero al distrito escolar y a todos los empleados de la escuela de cualquier responsabilidad civil en caso de que mi hijo/a sufra una reacción adversa como resultado de la auto-administración del medicamento durante las horas de clases. FIRMA DEL PADRE/GUARDIAN: FECHA: COMPLETADO POR EL ESTUDIANTE: Me han enseñado el uso apropiado de mi medicamento y lo tomaré de acuerdo a las instrucciones dadas por mi médico. Entiendo que el uso se mi medicamento de cualquier otra forma que la prescrita por mi médico, puede tener como resultado una acción disciplinaria por parte de la Escuela/Distrito. FIRMA DEL ESTUDIANTE: FECHA:

Favor de regresar el formulario completo y firmado por el médico, padre/guardián y estudiante a la oficina de salud de la escuela de su hijo/a. Los formularios de medicamentos deben ser renovados a principios de cada año escolar o cada vez que haya un cambio en la medicamento o instrucciones de uso.

NO SE PERMITIRÀ NINGÚN MEDICAMENTO SIN LAS FIRMAS REQUERIDAS.