

STUDENTS

SERIES 5000

ADMINISTRATION OF STUDENT MEDICATIONS IN THE SCHOOLS

POLICY

A. Definitions

- Administration of medication means any one of the following activities: handling, storing, preparing or pouring of medication; conveying it to the student according to the medication order; observing the student inhale, apply, swallow, or self-inject the medication, when applicable; documenting that the medication was administered; and counting remaining doses to verify proper administration and use of the medication.
- **Authorized prescriber** means a physician, dentist, optometrist, advanced practice registered nurse, or physician assistant, and, for interscholastic and intramural athletic events only, a podiatrist.
- **Cartridge Injector** means an automatic prefilled cartridge injector or similar automatic injectable equipment used to deliver epinephrine in a standard dose for emergency first aid response to allergic reactions.
- **Coach** means any person holding a coaching permit who is hired by a local or regional board of education to coach for a sport season.
- **Controlled drugs** means those drugs as defined in Connecticut General Statutes Section 21a-240.
- **Cumulative health record** means the cumulative health record of a pupil mandated by Connecticut General Statutes Section 10-206.
- **Director** means the person responsible for the day-to-day operations of any school readiness program or before-and-after school program.
- **Eligible student** means a student who has reached the age of eighteen or is an emancipated minor.
- **Error means:**
 - (1) the failure to do any of the following as ordered:
 - (a) administer a medication to a student;
 - (b) administer medication within the time designated by the prescribing physician;
 - (c) administer the specific medication prescribed for a student;
 - (d) administer the correct dosage of medication;

- (e) administer medication by the proper route; and/or
 - (f) administer the medication according to generally accepted standards of practice; or
 - (2) administration of medication to a student which is not ordered, or which is not authorized in writing by the parent or guardian of such student.
- **Extracurricular activities** means activities sponsored by local or regional boards of education that occur outside of the school day, are not part of the educational program, and do not meet the definition of before-and-after school programs and school readiness programs.
 - **Guardian** means one who has the authority and obligations of guardianship of the person of a minor, and includes: (1) the obligation of care and control; and (2) the authority to make major decisions affecting the minor's welfare, including, but not limited to, consent determinations regarding marriage, enlistment in the armed forces and major medical, psychiatric or surgical treatment.
 - **Intramural athletic events** means tryouts, competition, practice, drills, and transportation to and from events that are within the bounds of a school district for the purpose of providing an opportunity for students to participate in physical activities and athletic contests that extend beyond the scope of the physical education program.
 - **Interscholastic athletic events** means events between or among schools for the purpose of providing an opportunity for students to participate in competitive contests which are highly organized and extend beyond the scope of intramural programs and includes tryouts, competition, practice, drills and transportation to and from such events.
 - **Investigational drug** means any medication with an approved investigational new drug (IND) application on file with the Food and Drug Administration (FDA), which is being scientifically tested and clinically evaluated to determine its efficacy, safety and side effects and which has not yet received FDA approval.
 - **Licensed athletic trainer** means a licensed athletic trainer employed by the school district pursuant to Chapter 375a of the Connecticut General Statutes.
 - **Medication** means any medicinal preparation, both prescription and non-prescription, including controlled drugs, as defined in Connecticut General Statutes Section 21a-240. This definition includes Aspirin, Ibuprofen, or Aspirin substitutes containing Acetaminophen.
 - **Medication emergency** means a life-threatening reaction of a student to a medication.
 - **Medication order** means the authorization by an authorized

prescriber for the administration of medication to a student, which shall include the name of the student, the name and generic name of the medication, the dosage of the medication, the route of administration, the time of administration, the frequency of administration, the indications for medication, any potential side effects including overdose or missed dose of the medication, the start and termination dates not to exceed a 12-month period, and the written signature of the prescriber.

- **Medication plan** means a documented plan established by the school nurse in conjunction with the parent and student regarding the administration of medication in school. Such plan may be a stand-alone plan, part of an individualized health care plan, an emergency care plan or a medication administration form.
- **Nurse** means an advanced practice registered nurse, a registered nurse or a practical nurse licensed in Connecticut in accordance with Chapter 378, Connecticut General Statutes
- **Occupational Therapist** means an occupational therapist employed full time by the local or regional board of education and licensed in Connecticut pursuant to Chapter 376a of the Connecticut General Statutes.
- **Optometrist** means an optometrist licensed to provide optometry pursuant to Chapter 380 of the Connecticut General Statutes.
- **Paraprofessional** means a health care aide or assistant or an instructional aide or assistant employed by the local or regional board of education who meets the requirements of such board of employment as a health care aide or assistant or instructional aide or assistant.
- **Physical Therapist** means a physical therapist employed full time by the local or regional board of education and licensed in Connecticut pursuant to Chapter 376 of the Connecticut General Statutes.
- **Physician** means a doctor of medicine or osteopathy licensed to practice medicine in Connecticut pursuant to Chapters 370 and 371 of the Connecticut General Statutes, or licensed to practice medicine in another state.
- **Podiatrist** means an individual licensed to practice podiatry in Connecticut pursuant to Chapter 375 of the Connecticut General Statutes.
- **Principal** means the administrator in the school.
- **Research or study medications** means FDA-approved medications being administered according to an approved study protocol. A copy of the study protocol shall be provided to the school nurse along with the name of the medication to be

administered and the acceptable range of dose of such medication to be administered.

- **School** means any educational facility or program which is under the jurisdiction of the Board excluding extracurricular activities.
- **School nurse** means a nurse appointed in accordance with Connecticut General Statutes Section 10-212.
- **School nurse supervisor** means the nurse designated by the local or regional board of education as the supervisor or, if no designation has been made by the board, the lead or coordinating nurse assigned by the board.
- **Self administration of medication** means the control of the medication by the student at all times and is self managed by the student according to the individual medication plan.
- **Teacher** means a person employed full time by Board who has met the minimum standards as established by Board for performance as a teacher and has been approved by the school medical advisor and school nurse to be designated to administer medications pursuant to the Regulations of Connecticut State Agencies Sections 10-212a-I through 10-212a-7.

B. General Policies on Administration of Medications

- (1) No medication, including non-prescription drugs, may be administered by any school personnel without:
 - (a) the written medication order of an authorized prescriber (for prescription drugs);
 - (b) the written authorization of the student's parent or guardian or eligible student; and
 - (c) the written permission of a parent for the exchange of information between the prescriber and the school nurse necessary to ensure safe administration of such medication
- (2) Prescribed medications shall be administered to and taken by only the person for whom the prescription has been written.
- (3) Medications may be administered only by a licensed nurse; or, in the absence of a licensed nurse, by:
 - (a) a full-time principal, a full-time teacher, or a full-time licensed physical or occupational therapist employed by the school district. A full-time principal, teacher, licensed physical or occupational therapist employed by the school district may administer oral, topical, or inhalant medications. Such individuals may administer injectable medications only to a student with a medically diagnosed allergic condition that may require prompt treatment to protect the student against

- serious harm or death.
- (b) students with chronic medical conditions who are able to self administer medication, provided all of the following conditions are met:
 - (i) an authorized prescriber provides a written medication order, including the recommendation for such self administration;
 - (ii) there is a written authorization for self-administration from the student's parent or guardian or eligible student;
 - (iii) the school nurse has developed a plan for self-administration and general supervision, and has documented the plan in the student's cumulative health record;
 - (iv) the school nurse has assessed the student's competency for self-administration and deemed it safe and appropriate, including that the student: is capable of identifying and selecting the appropriate medication by size, color, amount or other label identification; knows the frequency and time of day for which the medication is ordered; can identify the presenting symptoms that require medication; administers the medication appropriately; maintains safe control of the medication at all times; seeks adult supervision whenever warranted; and cooperates with the established medication plan.
 - (v) the principal, appropriate teachers, and coaches of intramural or interscholastic athletics are informed the student is self administering prescribed medication;
 - (vi) such medication is transported to school and maintained under the student's control in accordance with this policy;-
 - (vii) controlled drugs, as defined in this policy, may not be self-administered by students, except in extraordinary situations, such as international field trips, with approval of the school nurse supervisor and the school medical advisor in advance and development of an appropriate plan.
 - (c) a student diagnosed with asthma who is able to self administer medication shall be permitted to retain possession of an asthmatic inhaler at all times while attending school, in order to provide for prompt treatment to protect such child against serious harm or death, provided all of the following conditions are met:
 - (i) an authorized prescriber provides a written order

- requiring the possession of an inhaler by the student at all times in order to provide for prompt treatment in order to protect the child against serious harm or death and authorizing the student's self-administration of medication, and such written order is provided to the school nurse;
- (ii) there is a written authorization from the student's parent or guardian regarding the possession of an inhaler by the student at all times in order to protect the child against serious harm or death and authorizing the student's self-administration of medication, and such written authorization is provided to the school nurse
 - (iii) the conditions set forth in subsection (b) above have been met, except that the school nurse's review of a student's competency to self-administer an inhaler for asthma in the school setting shall not be used to prevent a student from retaining and self-administering an inhaler for asthma. Students may self-administer medication with only the written authorization of an authorized prescriber and written authorization from the student's parent or guardian or eligible student;
 - (iv) the conditions for self-administration meet any regulations as may be imposed by the State Board of Education in consultation with the Commissioner of Public Health.
- (d) a student diagnosed with an allergic condition who is able to self administer medication shall be permitted to retain possession of an automatic prefilled injection cartridge or similar automatic injectable equipment at all times while attending school, in order to provide for prompt treatment to protect such child against serious harm or death, provided all of the following conditions are met:
- (i) an authorized prescriber provides a written order requiring the possession of an automatic prefilled injection cartridge or similar automatic injectable equipment by the student at all times in order to provide for prompt treatment in order to protect the child against serious harm or death and authorizing the student's self-administration of medication, and such written order is provided to the school nurse;

- (ii) there is a written authorization from the student's parent or guardian regarding the possession of an automatic prefilled injection cartridge or similar automatic injectable equipment by the student at all times in order to protect the child against serious harm or death and authorizing the student's self-administration of medication, and such written authorization is provided to the school nurse;
 - (iii) the conditions set forth in subsection (b) above have been met, except that the school nurse's review of a student's competency to self-administer cartridge injectors for medically-diagnosed allergies in the school setting shall not be used to prevent a student from retaining and self-administering a cartridge injector for medically-diagnosed allergies. Students may self-administer medication with only the written authorization of an authorized prescriber and written authorization from the student's parent or guardian or eligible student;
 - (iv) the conditions for self-administration meet any regulations as may be imposed by the State Board of Education in consultation with the Commissioner of Public Health.
- (e) a coach of intramural or interscholastic athletic events or licensed athletic trainer, during intramural or interscholastic athletic events, may administer inhalant medications prescribed to treat respiratory conditions and/or medication administered with a cartridge injector for students with medically diagnosed allergic conditions which may require prompt treatment to protect the student against serious harm or death, provided all of the following conditions are met:
- (i) the school nurse has determined that a self-administration plan is not viable;
 - (ii) the school nurse has provided to the coach a copy of the authorized prescriber's order and parental permission form;
 - (iii) the parent/guardian has provided the coach or licensed athletic trainer with the medication in accordance with Section H of this policy, and such medication is separate from the medication stored in the school health office for use during the school day; and
 - (iv) the coach or licensed athletic trainer agrees to the administration of emergency medication and

- implements the emergency care plan, identified in Section E of this policy, when appropriate.
- (f) an identified school paraprofessional may administer medications to a specific student, provided that all of the following conditions are met:
 - (i) there is written authorization from the student's parents; and
 - (ii) medication is administered pursuant to the written order of the student's (A) physician licensed to practice medicine, (B) an advanced practice registered nurse licensed to prescribe in accordance with section 20-94a of the Connecticut General Statutes, or (C) a physician assistant licensed to prescribe in accordance with section 20-12d of the Connecticut General Statutes; and
 - (iii) a school nurse and school medical advisor jointly approve and provide supervision to the identified school paraprofessional to administer medication, including, but not limited to, medication administered with a cartridge injector, to a specific student with a medically diagnosed allergic condition that may require prompt treatment in order to protect the student against serious harm or death.
 - (g) a licensed practical nurse, after the school nurse has established the medication plan, provided that the licensed practical nurse may not train or delegate the administration of medication to another individual, and provided that the licensed practical nurse can demonstrate one of the following:
 - (i) training in administration of medications as part of their basic nursing program;
 - (ii) successful completion of a pharmacology course and subsequent supervised experience; or
 - (iii) supervised experience in the administration of medication while employed in a health care facility.
4. Medications may also be administered by a parent or guardian to his/her own child on school grounds.
 5. Investigational drugs or research or study medications may be administered only by a licensed nurse.

C. Documentation and Record Keeping

- (1) Each school where medications are administered shall maintain an individual medication administration record for each student who receives medication during school hours. This record shall include the following information:

- (a) the name of the student;
 - (b) the name of the medication;
 - (c) the dosage of the medication;
 - (d) the route of the administration, (i.e., oral, topical, inhalant, etc.);
 - (e) the frequency of administration;
 - (f) the name of the authorized prescriber;
 - (g) the dates for initiating and terminating the administration of medication including extended year programs;
 - (h) the quantity received at school and verification by the adult delivering the medication of the quantity received;
 - (i) the date the medication is to be reordered (if any);
 - (j) any student allergies to food and/or medications;
 - (k) the date and time of each administration or omission, including the reason for any omission;
 - (l) the dose or amount of each medication administered; and,
 - (m) the full written or electronic legal signature of the nurse, principal, teacher, or coach of intramural and interscholastic athletics administering the medication.
 - (n) for controlled medications, a medication count which should be conducted and documented at least once a week and co-signed by the assigned nurse and a witness.
- (2) All records are either to be made in ink, and shall not be altered, or recorded electronically in a record that cannot be altered.
- (3) Written orders of authorized prescribers, written authorizations of parent or guardian, the written parental permission for the exchange of information by the prescriber and school nurse to ensure safe administration of such medication, and the completed medication administration record for each student shall be filed in the student's cumulative health record.
- (4) Authorized prescribers may make verbal orders, including telephone orders, for a change in medication order. Such verbal orders may be received only by a school nurse and must be followed by a written order, which may be faxed, and must be received within three (3) school days.
- (5) Medication administration records will be made available to the Department of Education for review until destroyed pursuant to Section 11-8a and Section 10-212a(b) of the Connecticut General Statutes.
- (a) The completed medication administration record for controlled medications may, at the discretion of the school district, be destroyed in accordance with Section

- M8 of the Connecticut Municipality Record Retention Schedule, so long as it is superseded by a summary on the student health record.
- (b) The completed medication administration record for controlled medications shall be maintained in the same manner as the non-controlled medications. In addition, a separate medication administration record needs to be maintained in the school for three (3) years pursuant to Section 10-212a(b) of the Connecticut General Statutes.
- (6) Documentation of any administration of medication by a coach or licensed athletic trainer shall be completed on forms provided by the school and the following procedures shall be followed:
- (a) a medication administration record for each student shall be maintained in the athletic offices;
 - (b) administration of a cartridge injector medication shall be reported to the school nurse at the earliest possible time, but no later than the next school day;
 - (c) all instances of medication administration, except for the administration of cartridge injector medication, shall be reported to the school nurse at least monthly, or as frequently as required by the individual student plan; and
 - (d) the administration of medication record must be submitted to the school nurse at the end of each sport season and filed in the student's cumulative health record.

D. Errors In Medication Administration

- (1) Whenever any error in medication administration occurs, the following procedures shall apply:
 - (a) the person making the error in medication administration shall immediately implement the medication emergency procedures in this Policy if necessary;;
 - (b) the person making the error in medication administration shall; in all cases immediately notify the school nurse, principal, school nurse supervisor, and authorized prescriber. The person making the error, in conjunction with the principal, shall also immediately notify the parent or guardian, advising of the nature of the error and all steps taken or being taken to rectify the error, including contact with the authorized prescriber and/or any other medical action(s);
 - (c) the principal shall notify the Superintendent of the Superintendent's designee.
- (2) The school nurse, along with the person making the error, shall complete a report using the authorized medication

error report form. The report shall include any corrective action taken

- (3) Any error in the administration of medication shall be documented in the student's cumulative health record.
- (4) These same procedures shall apply to coaches and licensed athletic trainers during intramural and interscholastic events, except that if the school nurse is not available, a report must be submitted by the coach or licensed athletic trainer to the school nurse the next school day.

E. Medication Emergency Procedures

- (1) Whenever a student has a life-threatening reaction to administration of a medication, resolution of the reaction to protect the student's health and safety shall be the foremost priority. The school nurse and the authorized prescriber shall be notified immediately, or as soon as possible in light of any emergency medical care that must be given to the student.
- (2) Emergency medical care to resolve a medication emergency includes but is not limited to the following, as appropriate under the circumstances:
 - (a) use of the 911 emergency response system;
 - (b) application by properly trained and/or certified personnel of appropriate emergency medical care techniques, such as cardiopulmonary resuscitation;
 - (c) contact with a poison control center; and
 - (d) transporting the student to the nearest available emergency medical care facility that is capable of responding to a medication emergency.
- (3) As soon as possible, in light of the circumstances, the principal shall be notified of the medication emergency. The principal shall immediately thereafter contact the parent or guardian as well as the Superintendent or the Superintendent's designee advising of the existence and nature of the medication emergency and all steps taken or being taken to resolve the emergency and protect the health and safety of the student, including contact with the authorized prescriber and/or any other medical action(s) that are being or have been taken.

F. Supervision

1. The school nurse is responsible for general supervision of administration of medications in the school(s) to which that nurse is assigned.
2. The school nurse's duty of general supervision includes, but is not limited to the following:
 - (a) availability on a regularly scheduled basis to:

- (i) review orders or changes in orders, and communicate these to personnel designated to give medication for appropriate follow-up;
 - (ii) set up a plan and schedule to ensure medications are given properly;
 - (iii) provide training to licensed nursing personnel, full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and interscholastic athletics in the administration of medications and identified paraprofessionals designated in accordance with Section B(3)(c), above, and assess the competency of these individuals to administer medication;
 - (iv) support and assist other licensed nursing personnel, full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics, and identified paraprofessionals designated in accordance with Section B(3)(c) above, to prepare for and implement their responsibilities related to the administration of specific medications during school hours and during intramural and interscholastic athletics as provided by this policy;
 - (v) provide appropriate follow-up to ensure the administration of medication plan results in desired student outcomes; and
 - (vi) provide consultation by telephone or other means of telecommunications, which consultation may be provided by an authorized prescriber or other nurse in the absence of the school nurse.
- (b) In addition, the school nurse shall be responsible for
- (i) implementing policies and procedures regarding the receipt, storage, and administration of medications;
 - (ii) reviewing, on a periodic basis, all documentation pertaining to the administration of medications for students;
 - (iii) perform observations of the competency of medication administration by full-time principals, full-time teachers licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics, and licensed athletic trainers in accordance with Section B(3)(e), above,

- and identified paraprofessionals designated in accordance with Section B(3)(e f) above, who have been newly trained to administer medications; and,
- (iv) conducting periodic reviews, as needed, with licensed nursing personnel, full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics, and licensed athletic trainers in accordance with Section B(3) (e) above, and identified paraprofessionals designated in accordance with Section B(3)(f), above regarding the needs of any student receiving medication.

G. Training of School Personnel

- (1) Full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics, and licensed athletic trainers in accordance with Section B (3) (e), above and identified paraprofessionals designated in accordance with Section B(3)(e f), above who are designated to administer medications shall at least annually receive training in their safe administration, and only trained full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics, and licensed athletic trainers in accordance with Section B (3) (e), above, and paraprofessionals designated in accordance with Section B(3)(f), above, shall be allowed to administer medications.
- (2) Training for full-time principals, full-time teachers, and full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics, and licensed athletic trainers in accordance with Section B (3) (e), above, and identified paraprofessionals designated in accordance with Section B(3)(f), above, shall include, but is not necessarily limited to the following:
 - (a) the general principles of safe administration of medication;
 - (b) the procedures for administration of medications, including the safe handling and storage of medications, and the required record-keeping
 - (c) specific information related to each student's medication plan, including the name and generic name of the medication, indications for medication dosage, routes, time and frequency of administration,

- therapeutic effects of the medication, potential side effects, overdose or missed doses of the medication, and when to implement emergency interventions.
- (3) The Board shall maintain documentation of medication administration training as follows:
 - (a) dates of general and student-specific trainings;
 - (b) content of the trainings;
 - (c) individuals who have successfully completed general and student-specific administration of medication training for the current school year; and
 - (d) names and credentials of the nurse or school medical advisor trainer or trainers.
 - (4) Licensed practical nurses may not conduct training in the administration of medication to another individual.
- H. Handling, Storage and Disposal of Medications
- (1) All medications, except those approved for transporting by students for self medication and those administered by coaches of intramural or interscholastic athletics or licensed athletic trainers in accordance with Section B(3)(e) above, must be delivered by the parent, guardian, or other responsible adult to the nurse assigned to the student's school or, in the absence of such nurse, the school principal who has been trained in the appropriate administration of medication. Medications administered by coaches of intramural or interscholastic athletics or licensed athletic trainers must be delivered by the parent or guardian directly to the coach or licensed athletic trainer in accordance with Section B(3)(e) above.
 - (2) The nurse shall examine on-site any new medication, medication order, and the required authorization to administer form, and shall develop a medication administration plan for the student before any medication is given to the student by any school personnel. No medication shall be stored at a school without a current written order from an authorized prescriber.
 - (3) The school nurse shall review all medication refills with the medication order and parent authorization prior to the administration of medication.
 - (4) Emergency Medications
 - (a) Except as otherwise determined by a student's emergency care plan, emergency medications shall be stored in an unlocked, clearly labeled and readily accessible cabinet or container in the health room during school hours under the general supervision of the school nurse, or in the absence of the school nurse, the principal or the principal's designee who has been trained in the administration of medication;
 - (b) Emergency medication shall be locked beyond the

- regular school day or program hours, except as otherwise determined by a student's emergency care plan.
- (5) All medications, except those approved for keeping by students for self medication, shall be kept in a designated and locked location, used exclusively for the storage of medication. Controlled substances shall be stored separately from other drugs and substances in a separate, secure, substantially constructed, locked metal or wood cabinet.
 - (6) Access to stored medications shall be limited to persons authorized to administer medications. Each school shall maintain a current list of such authorized persons.
 - (7) All medications, prescription and non prescription, shall be delivered and stored in their original containers and in such a manner that renders them safe and effective.
 - (8) At least two sets of keys for the medication containers or cabinets shall be maintained for each school. One set of keys shall be maintained under the direct control of the school nurse or nurses and an additional set shall be under the direct control of the Principal.
 - (9) Medications that must be refrigerated shall be stored in a refrigerator at no less than 36 degrees Fahrenheit and no more than 46 degrees Fahrenheit. The refrigerator must be located in the health office that is maintained for health services with limited access. Non-controlled medication may be stored directly on the refrigerator shelf with no further protection needed. Controlled medication shall be stored in a locked box which is affixed to the refrigerator shelf.
 - (10) All unused, discontinued, or obsolete medications should be removed from storage areas and either returned to the parent or guardian or, if the medication cannot be returned to the parent or guardian, the medication shall be destroyed in collaboration with the school nurse.
 - (a) non controlled drugs shall be destroyed in the presence of at least one witness. Controlled drugs shall be destroyed in accordance with Part 1307.21 of the Code of Federal Regulations, or by surrendering them to the Commissioner of the Department of Consumer Protection.
 - (7b) controlled drugs shall be destroyed pursuant to Section 21a-262-3 of the Regulations of Connecticut State Agencies;
 - (c) accidental destruction or loss of controlled drugs must be verified in the presence of a second person, including confirmation of the presence or absence of residue and jointly documented on the student

- medication administration record and on a medication error form pursuant to Section 10-212a(b) of the Connecticut General Statutes. If no residue is present, notification must be made to the Department of Consumer Protection pursuant to Section 21a-262-3 of the Regulations of Connecticut State Agencies.
- (11) Medications to be administered by coaches of intramural or interscholastic athletic events or licensed athletic trainers shall be stored:
- (a) in containers for the exclusive use of holding medications;
 - (b) in locations that preserve the integrity of the medication;
 - (c) under the general supervision of the coach or licensed athletic trainer trained in the administration of medication; and
 - (d) in a locked secured cabinet when not under the general supervision of the coach or licensed athletic trainer during intramural or interscholastic athletic events.
- (12) In no event shall a school store more than a three (3) month supply of a medication for a student.

I. Review and Revision of Policy

In accordance with the provisions of Section 10-212a-2(a), Policy No. 5145 will be reviewed periodically, and at least biennially, with the advice and approval of the school medical advisor, the school nurse supervisor, or other qualified licensed physician. Any proposed revisions to the policy must be made with the advice and approval of the school medical advisor, school nurse supervisor or other qualified licensed physician.

Legal References:

Connecticut General Statutes:

Section 10-206
Section 10-212
Section 10-212a
Section 19a-900
Section 21a-240
Section 52-557b

Regulations of Conn. State Agencies:

Sections 10-212a-1 through 10-212a-10, inclusive

Memorandum of Decision, "In Re: Declaratory Ruling/Delegation by Licensed Nurses to Unlicensed Assistive Personnel," Connecticut State Board of Examiners for Nursing (April 5, 1995)

Code of Federal Regulations:
Title 21 Part 1307.21

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