

## APPROVED CHANGES 10/28/03 **Administration of Epinephrine**

### Amendments to the Regulations Governing the Administration of Prescription Medications in Public and Private Schools

Section 1. 105 CMR is amended by adding the following section:

#### 210.100: Administration of Epinephrine

(A) A public school district or non-public school, as defined by the Massachusetts Department of Education, may register with the Department for the limited purpose of permitting properly trained school personnel to administer epinephrine by auto injector in a life-threatening situation during the school day when a school nurse is not immediately available, including field trips, provided that the following conditions are met:

(1) the school committee or, in the case of a non-public school, the chief administrative officer, approves policies developed by the designated school nurse leader or, in the absence of a school nurse leader, a school nurse with designated responsibility for management of the program ("responsible school nurse") governing administration of epinephrine by auto injector. This approval must be renewed every two years;

(2) the school committee or chief administrative officer provides an assurance to the Department that sufficient school nurses are available to provide proper oversight of the program, and provides such back-up documentation as required by the Department;

(3) in consultation with the school physician, the designated school nurse leader or responsible school nurse manages and has final decision making authority about the program. This person, or school nurses designated by this person, shall select the individuals authorized to administer epinephrine by auto injector. Persons authorized to administer epinephrine shall meet the requirements of section 210.004(B)(2);

(4) the school personnel authorized to administer epinephrine by auto injector are trained and tested for competency by the designated school nurse leader or responsible school nurse, or school nurses designated by this person, in accordance with standards and a curriculum established by the Department.

(a) The designated school nurse leader or responsible school nurse, or school nurses designated by this person, shall document the training and testing of competency.

(b) The designated school nurse leader or responsible school nurse, or a designee, shall provide a training review and informational update at least twice a year.

(c) The training, at a minimum, shall include: (i) proper use of the auto-injector; (ii) the importance of following the medication administration plan; (iii) recognition of the symptoms of a severe allergic reaction; (iv) requirements for proper storage and security, notification of appropriate persons following administration, and record keeping; and (v) procedures for risk reduction.

(d) The school shall maintain and make available upon request by parents or staff a list of those school personnel authorized and trained to administer epinephrine by auto injector in an emergency, when the school nurse is not immediately available;

(5) epinephrine shall be administered only in accordance with an individualized medication administration plan satisfying the applicable requirements of 105 CMR 210.005(E) and 210.009(A)(6), updated every year, which includes the following:

(a) a diagnosis by a physician that the child is at risk of a life threatening allergic reaction and a medication order containing indications for administration of epinephrine;

(b) written authorization by a parent or legal guardian;

(c) home and emergency number for the parent(s) or legal guardian(s), as well as the names(s) and phone number(s) of any other person(s) to be notified if the parent(s) or guardian(s) are unavailable;

(d) identification of places where the epinephrine is to be stored, following consideration of the need for storage: (i) at one or more places where the student may be most at

risk; (ii) in such a manner as to allow rapid access by authorized persons, including possession by the student when appropriate; and (iii) in a place accessible only to authorized persons. The storage location(s) should be secure, but not locked during those times when epinephrine is most likely to be administered, as determined by the school nurse;

(e) a list of the school personnel who would administer the epinephrine to the student in a life threatening situation when a school nurse is not immediately available;

(f) a plan for comprehensive risk reduction for the student, including preventing exposure to specific allergens; and

(g) an assessment of the student's readiness for self-administration and training, as appropriate.

(6) when epinephrine is administered, there shall be immediate notification of the local emergency medical services system (generally 911), followed by notification of the student's parent(s) or guardian(s) or, if the parent(s) or guardian(s) are not available, any other designated person(s), the school nurse, the student's physician, and the school physician, to the extent possible;

(7) there shall be procedures, in accordance with any standards established by the Department, for:

(a) developing the medication administration plan;

(b) developing general policies for the proper storage of medication, including limiting access to persons authorized to administer the medication and returning unused or outdated medication to a parent or guardian whenever possible;

(c) recording receipt and return of medication by the school nurse;

(d) documenting the date and time of administration;

(e) notifying appropriate parties of administration and documenting such notification;

(f) reporting medication errors in accordance with 105 CMR 210.005(F)(5);

(g) reviewing any incident involving administration of epinephrine to determine the adequacy of the response and to consider ways of reducing risks for the particular student and the student body in general;

(h) planning and working with the emergency medical system to ensure the fastest possible response;

(i) submitting a written report to the Department of Public Health each time epinephrine is administered to a student or staff, on a form obtained from the Department;

(j) permitting the Department of Public Health to inspect any record related to the administration of epinephrine without prior notice, to ensure compliance with 105 CMR 210.100.

(B) Epinephrine may be administered in accordance with these regulations in before and after school programs supervised or directed by school personnel or persons hired by the school for that purpose, such as athletic programs, special school events and school-sponsored programs on week-ends, or in additional before and after school programs that the school nurse finds suitable and appropriate for administration of epinephrine, provided that:

(1) the school committee or chief administrative officer in a non-public school approves a policy, developed in accordance with section 210.100(A)(1), for administration of epinephrine in such programs. The policy shall identify the individual(s) responsible, in consultation with the designated school nurse leader or responsible school nurse, for specifying which before and after school programs are to be covered by the policy. If the policy so provides, epinephrine may be administered to a student from another school or school district, provided that the requirements of subsection 210.100 (B)(6) are met;

(2) the school nurse approves administration of epinephrine in that program;

(3) the school complies with the requirements of 105 CMR 210.100 (A), including registration, but need not comply with the requirement of section 210.004(B)(3); (

(4) the programs are not licensed by another state agency, in which case the regulations promulgated by that state agency will apply;

(5) there are procedures for immediate notification of emergency medical services following administration;

(6) epinephrine is administered to a student from another school or school district only in accordance with approved school policy and the following requirements:

(a) in the event the student is accompanied by school personnel from the sending school, such personnel shall be responsible for ensuring that the epinephrine is brought, properly stored and administered as necessary, in accordance with the medication administration plan developed by the sending school in accordance with section 210.005(E);

(b) in the event the student is not accompanied by school personnel from the sending school, or such personnel are not trained in the administration of epinephrine, the receiving school may accept responsibility for administering epinephrine, provided that the school nurse or other person designated by the school nurse in the receiving school approves administration of epinephrine for that student and the student provides the school nurse or other person designated by the school nurse in the receiving school with: (i) appropriate prior notice in accordance with any procedures established by the school nurse; (ii) written authorization and emergency phone numbers from a parent or guardian; (iii) any specific instructions for administration; (iv) the medication to be administered; and (v) whenever, possible, a copy of the medication administration plan developed in accordance with section 105 CMR 210.005(E).

(C) Administration of epinephrine shall be governed solely by section 210.100. The provisions of sections 210.004 (B)(5) and 210.005(E)(1)(O) shall not be applicable to the administration of epinephrine. Section 2. 105 CMR is amended by repealing existing subsection 210.004 (B)(4) and replacing it with the following: 210.004 (B)(4). The administration of parenteral medications may not be delegated, with the exception of epinephrine administered in accordance with 105 CMR 210.100.