EPINEPHRINE AUTOINJECTOR

A student may possess and use at school or at any activity, event, or program sponsored by or in which his/her school is a participant, an epinephrine autoinjector to treat anaphylaxis, if both of the following conditions are satisfied:

A. The student has the written approval of the prescriber and, if the student is a minor, the written approval of his/her parent, guardian or other person having care or charge of the student. The prescriber’s written approval shall contain the following information:

1. The student’s name and address;
2. The names and dose of the medication contained in the autoinjector;
3. The date the administration of the medication is to begin;
4. The date, if known, that the administration of the medication is to cease;
5. An acknowledgement that the prescriber has determined that the student is capable of possessing and using the autoinjector appropriately and has provided the student with training in the proper use of the autoinjector;
6. Circumstances in which the autoinjector should be used;
7. Written instructions that outline procedures school personnel should follow in the event the student is unable to administer the medication or the medication does not produce the expected relief from the student’s anaphylaxis;
8. Any severe adverse reactions that may occur to the child using the autoinjector and that should be reported to the prescriber;
9. Any severe adverse reactions that may occur to another child, for whom the autoinjector is not prescribed, should such a child receive a dose of the medication;
10. At least one emergency telephone number for contacting the prescriber in an emergency;
11. At least one emergency telephone number for contacting the parent, guardian, or other person having care or charge of the student in an emergency;
12. Any other special instructions from the prescriber.
B. The school principal and school nurse assigned to the student’s building has received copies of the written approvals required by division A. of this policy and a backup dose of the anaphylaxis medication.

Whenever a student uses an autoinjector or a school employee administers anaphylaxis medication to a student, a school employee shall immediately request assistance from an emergency medical service provider.

Immunity from Tort Liability

The school district, a member of the Board of Education, or a school district employee shall not be liable in damages in a civil action for injury, death, or loss to person or property allegedly arising from a district employee’s prohibiting a student from using an autoinjector because of the employee’s good faith belief that the conditions of divisions A. and B. of this policy had not been satisfied.

The school district, a member of the Board of Education, or a school district employee shall not be liable in damages in a civil action or injury, death, or loss to person or property allegedly arising from a district employee’s permitting a student to use an autoinjector because of the employee’s good faith belief that the conditions of divisions A. and B. of this policy had been satisfied.

When a school district is required to permit a student to possess and use an autoinjector because the conditions of divisions A. and B. of this policy have been satisfied, the school district, any member of the Board of Education, or any school district employee is not liable in damages in a civil action for injury, death, or loss to person or property allegedly arising from the use of the autoinjector by a student for whom it was not prescribed.

Nothing in this policy eliminates, limits, or reduces any other immunity or defense that the school district, any member of the Board of Education, or any school district employee may be entitled to under O.R.C. Chapter 2744, any other provision of the Revised Code, or the common law of the state.

EMPLOYEE USE:

Prescriber-Issued Protocol:

[Definitive orders for epinephrine auto injectors and dosage to be administered.]

District Protocol:

1. Epinephrine auto injectors shall be stored at each building in the secure, locked location other prescription medications are stored.
2. Epinephrine auto injectors shall be kept in the carrying tube they come in, tightly closed, at room temperature and away from light, extreme temperatures and moisture. Epinephrine auto injectors must be replaced when the expiration date on the device or device packaging has passed. An epinephrine auto injector must be disposed of if used or tampered with.

3. In addition to school nurses and athletic trainers, Board employees who have received training in accordance with this policy may access and use an epinephrine auto injector to provide a dosage of epinephrine to an individual in an emergency situation.

4. The District’s nurse or another licensed healthcare provider, as determined by the Superintendent, shall provide epinephrine auto injector training to Board employees in accordance with this policy. Such training shall include lessons on proper storage, procurement, and use of the epinephrine auto injector. Such training must be completed before an employee is authorized to access and use an epinephrine auto injector.

5. A school nurse, athletic trainer, or other employee authorized to access and use an epinephrine auto injector may use such device if an individual exhibits signs and symptoms of anaphylaxis, or in other emergency situations where use is medically necessary.

6. Assistance from an emergency medical provider must be requested immediately after an epinephrine auto injector is used.

7. A dosage of epinephrine may be administered through an epinephrine auto injector in an emergency situation to students, Board employees or contractors, and school visitors.

LEGAL REFS: O.R.C. §3313.718; 3313.7110

Adopted: ______________________
LEXINGTON LOCAL SCHOOL DISTRICT

AUTHORIZATION FOR THE POSSESSION AND USE OF EPINEPHRINE AUTOINJECTOR

Student Name: ___________________________________________ Date: __________

Address: __________________________________________________________________

Authorization is hereby given for the student named above to:

( ) receive the prescribed medication indicated from the designated school personnel

( ) self-administer the prescribed medication as permitted by law.

I have determined the above-named student is capable of possessing and using an autoinjector appropriately and have provided the student with training in the proper use of the autoinjector.

( ) Yes

( ) No

Medication Name: _____________________________________________

Dosage: __________________________________________________________________

Date the administration is to begin: _________________________________

Date the administration is to cease: _________________________________

Circumstances in which autoinjector should be used: _______________________

_____________________________________________________________________

Adverse reactions that should be reported to the prescriber: _________________

_____________________________________________________________________

Adverse reactions for unauthorized user: _________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________
Procedure to follow in the event that student is unable to administer or medication does not produce the expected relief from student’s anaphylaxis: ______________________________________

______________________________________________

Other special instructions: __________________________________________________________

Prescriber and parent/guardian names, signature, and emergency phone numbers are required.

Prescriber’s name: ________________________________ Phone: ________________

Signature: ______________________________________ Date

Parent/guardian Name: ____________________________ Phone: (Home) __________

(Work) ______________________ (Other) ______________________

Signature: _______________________________ Date

Copies must be provided to principal and to the school nurse if one is assigned to the student’s building.