

**R7-2-810. Emergency Administration of Inhalers**

**A. Applicability. This rule applies to:**

1. Any school district or charter school that voluntarily chooses to stock inhalers pursuant to A.R.S § 15-158.

2. All school districts when required to stock inhalers pursuant to A.R.S. § 15-158.

**B. Definitions. The following definitions are applicable to this rule:**

1. “Authorized Entity” refers to any school district or charter school.

2. “Bronchodilator” means Albuterol or another short-acting bronchodilator that is approved by the United States Food and Drug Administration for the treatment of respiratory distress.

3. “Inhaler” means a device that delivers a bronchodilator to alleviate symptoms of respiratory distress that is manufactured in the form of a metered-dose inhaler or dry-powder inhaler that includes a spacer or holding chamber that attaches to the inhaler to improve the delivery of the bronchodilator.

4. “Respiratory distress” includes the perceived or actual presence of coughing, wheezing or shortness of breath.

5. “Standing order” means a prescription protocol or instructions issued by the chief medical officer of a county health department, physicians licensed pursuant to Title 32, Chapter 13 or 17, or nurse practitioners licensed pursuant to Chapter Title 32, Chapter 15.

**C. Annual training on recognition of symptoms of respiratory distress and administration of inhalers**

1. Each school district and charter school that elects to administer inhalers shall designate at least two employees at each school site who shall be required to be trained in the

recognition of respiratory distress symptoms, the procedures to follow when respiratory distress occurs, and the administration of inhalers, as directed on the prescription protocol. Schools may also designate agents to receive training. While each school is required to have two trained personnel in order to implement the stock inhaler policies, schools may train as many personnel or agents as they feel necessary.

2. Training in the administration of inhalers shall be conducted by a nationally recognized organization or professionally certified medical professionals that are experienced in training laypersons in emergency health treatment.

3. Training may be conducted online or in person and at a minimum shall include:

- a. How to recognize signs and symptoms of respiratory distress in accordance with good clinical practice.
- b. Standards and procedures for the storage of inhalers.
- c. Standards and procedures for the administration of an inhaler, as directed on the prescription protocol.
- d. Emergency follow-up procedures after the administration of an inhaler.

4. The organization that conducts the training shall issue a certificate to each person who successfully completes the training. The school employee or authorized agent shall submit this certificate to the school.

5. Annual training is required for all designated employees or agents of the school.

6. School districts and charter schools shall maintain and make available on request a list of school personnel or authorized agents who are authorized to administer inhalers pursuant to a standing order.

D. Procedures for annually requesting a standing order and the prescription for the inhaler and holding chamber

1. Each participating school district or charter school shall obtain a standing order and prescription for inhalers and spacers or holding chambers pursuant to A.R.S. § 15-158 from the chief medical officer of a county health department, a physician licensed pursuant to Title 32, Chapter 13 or 17, or a nurse practitioner pursuant to Title 32, Chapter 15.

2. Standing orders and prescriptions shall be requested and renewed annually.

E. Procedures for the administration of inhalers in emergency situations

1. School districts and charter schools that elect to administer inhalers shall:

a. Prescribe and enforce policies and procedures for the emergency administration of inhalers by designated and trained medical and non-medical personnel.

b. Designate at least two employees at each school to be trained to recognize respiratory distress and administer inhalers.

c. Require designated personnel or agents to participate in annual training and provide a certificate of successful completion to the school.

d. Designate employees who have completed the required training to be responsible for the storage, maintenance, control and general oversight of the inhalers and spacers or holding chambers acquired by the school.

e. Acquire and stock a supply of inhalers and spacers or holding chambers pursuant to a standing order prescription.

f. Store medication in a secure, temperature appropriate location, unlocked and readily accessible to designated personnel.

2. Pursuant to a standing order, an employee or agent of a school district or charter school who is trained in the administration of inhalers may administer or assist in the administration of an inhaler to a pupil or adult whom the employee believes in good faith to be exhibiting symptoms of respiratory distress while at school or a school-sponsored activity.

3. Procedures adopted by school districts and charter schools shall address at a minimum, the following requirements:

a. Determine if symptoms indicate possible respiratory distress or emergency and determine if the use of an inhaler will properly address the respiratory distress or emergency.

b. Administer the correct dose of inhaler medication, as directed by the prescription protocol, regardless of whether the individual who is believed to be experiencing respiratory distress has a prescription for an inhaler and spacer or holding chamber or has been previously diagnosed with a condition requiring an inhaler.

c. Restrict physical activity, encourage slow breaths and allow the individual to rest.

d. Assure that a trained employee stay with the subject who has been administered inhaler medication until it is determined whether the medication alleviates symptoms.

e. If applicable, instruct office staff to notify the school nurse if the inhaler is administered by a trained but non-licensed person.

f. Instruct school staff to notify the parent or guardian.

g. Call 911 if severe respiratory distress continues. Advise that inhaler medication was administered and stay with the person until emergency medical responders arrive.

h. If the individual shows improvement, keep the individual under supervision until breathing returns to normal, with no more chest tightness or shortness of breath, and the individual can walk and talk easily.

i. Allow a student to return to class if breathing has returned to normal and all symptoms have resolved.

j. Notify a parent or guardian once the inhaler has been administered.

k. Document the incident detailing who administered the inhaler, the approximate time of the incident, notifications made to the school administration, emergency responders, and parents/guardians.

l. Retain the incident data on file at the school pursuant to the general records retention schedule regarding health records for school districts and charter schools established by the Arizona State Library, Archives and Public Records.

m. Order replacement inhalers, spacers and holding chambers as needed.

4. A school district or charter school may accept monetary donations for or apply for grants for the purchase of inhalers and spacers or holding chamber or may accept donations of inhalers and spacers or holding chambers directly from the product manufacturers.

F. Immunity from Civil Liability. Chief medical officers of county health departments, physicians licensed pursuant to Title 32, Chapter 13 or 17, nurse practitioners licensed pursuant to Title 32, Chapter 15, school districts, charter schools and employees of school districts and charter schools are immune from civil liability with respect to all decisions made and actions taken that are based on good faith implementation of the requirements of A.R.S. § 15-158, except in cases of gross negligence, willful misconduct or intentional wrongdoing.