

**TITLE 7           HEALTH**  
**CHAPTER 30   FAMILY AND CHILDREN HEALTH CARE SERVICES**  
**PART 12       EMERGENCY MEDICATIONS IN SCHOOLS**

**7.30.12.1       ISSUING AGENCY:** New Mexico Department of Health.  
[7.30.12.1 NMAC - N, 02/27/2015]

**7.30.12.2       SCOPE:** This rule applies to public, private, or charter schools in New Mexico unless otherwise expressly limited.  
[7.30.12.2 NMAC - N, 02/27/2015]

**7.30.12.3       STATUTORY AUTHORITY:** These rules are promulgated pursuant to the following statutory authorities: (1) the Department of Health Act, Section 9-7-6(E) NMSA 1978, which authorizes the secretary of the department of health to "...make and adopt such reasonable and procedural rules and regulations as may be necessary to carry out the duties of the department and its divisions;" (2) the Public Health Act, Section 24-1-3(G) and (O) NMSA 1978 and Section 24-31-1 NMSA 1978, which authorize the department to prescribe the duties of school nurses to maintain and enforce rules to carry out the provisions of the Public Health Act; and to promulgate rules pursuant to the Emergency Medication in Schools Act; and (3) the Emergency Medication in Schools Act, Sections 22-33-1 through 22-33-4 NMSA 1978, which authorizes the department to adopt regulations to carry out the provisions of the Emergency Medication in Schools Act.  
[7.30.12.3 NMAC - N, 02/27/2015]

**7.30.12.4       DURATION:** Permanent.  
[7.30.12.4 NMAC - N, 02/27/2015]

**7.30.12.5       EFFECTIVE DATE:** February 27, 2015, unless a later date is cited at the end of a section.  
[7.30.12.5 NMAC - N, 02/27/2015]

**7.30.12.6       OBJECTIVE:** The purpose of this rule is to allow access to emergency medications in the school setting for the treatment of respiratory distress with albuterol and the treatment of anaphylactic reactions with epinephrine. Stock emergency medications are intended for students who have not previously been diagnosed with conditions leading to respiratory distress or anaphylaxis or who have a history of these conditions and do not have medications on their person or stored at school.  
[7.30.12.6 NMAC - N, 02/27/2015]

**7.30.12.7       DEFINITIONS:**

**A.       Definitions beginning with "A":**

(1)       **"Adverse event form"** is a department form used by school leaders and school nurses to report events with potential impact on the health of the students or the school, including administration of stock albuterol or epinephrine;

(2)       **"Albuterol"** includes albuterol or another inhaled bronchodilator, as recommended by the department of health, for the treatment of respiratory distress;

(3)       **"Albuterol aerosol canister"** means a portable drug delivery device packaged with multiple premeasured doses of albuterol;

(4)       **"Anaphylaxis" or "anaphylactic reaction"** means a sudden, severe, and potentially life-threatening whole-body allergic reaction.

**B.       Definitions beginning with "B": "BOP"** refers to the board of pharmacy.

**C.       Definitions beginning with "C": "Class D Medication room"** is specific for schools and is used only for emergency medications. The Class D Medication Room criteria is established by the board of pharmacy. The criteria includes requirements for procurement of medications, storage, tracking, and disposal of expired medications.

**D.       Definitions beginning with "D": "Department"** means department of health.

**E.       Definitions beginning with "E":**

(1)       **"Emergency medication"** means albuterol or epinephrine;

(2)       **"Epinephrine"** includes epinephrine or another medication, as recommended by the department of health, used to treat anaphylaxis until the immediate arrival of emergency medical system responders;

- (3) **“Epinephrine auto-injector”** means a portable, disposable drug delivery device that contains a premeasured single dose of epinephrine.
- F. Definitions beginning with “F”:** [RESERVED]
- G. Definitions beginning with “G”:** **“Governing body”** includes a governing body of a private school.
- H. Definitions beginning with “H”:** **“Health care practitioner”** means a person authorized by the state to prescribe emergency medication.
- I. Definitions beginning with “I”:** [RESERVED]
- J. Definitions beginning with “J”:** [RESERVED]
- K. Definitions beginning with “K”:** [RESERVED]
- L. Definitions beginning with “L”:** [RESERVED]
- M. Definitions beginning with “M”:** [RESERVED]
- N. Definitions beginning with “N”:** [RESERVED]
- O. Definitions beginning with “O”:** [RESERVED]
- P. Definitions beginning with “P”:** **“PED”** means the public education department.
- Q. Definitions beginning with “Q”:** [RESERVED]
- R. Definitions beginning with “R”:** **“Respiratory distress”** includes impaired oxygenation of the blood or impaired ventilation of the respiratory system.
- S. Definitions beginning with “S”:**
- (1) **“School”** means a public school, charter school, or private school;
- (2) **“Spacer”** means a holding chamber that is used to optimize the delivery of albuterol to a person's lungs;
- (3) **“Stock supply”** means an appropriate quantity of emergency medication, as recommended by the department of health.
- T. Definitions beginning with “T”:** **“Trained personnel”** means a school employee, agent or volunteer who has completed epinephrine administration training documented by the school nurse, school principal or school leader and approved by the department of health and who has been designated by the school principal or school leader to administer epinephrine on a voluntary basis outside of the scope of employment.
- U. Definitions beginning with “U”:** [RESERVED]
- V. Definitions beginning with “V”:** [RESERVED]
- W. Definitions beginning with “W”:** [RESERVED]
- X. Definitions beginning with “X”:** [RESERVED]
- Y. Definitions beginning with “Y”:** [RESERVED]
- Z. Definitions beginning with “Z”:** [RESERVED]

[7.30.12.7 NMAC - N, 02/27/2015; A/E, 2/23/2026]

### **7.30.12.8 EMERGENCY MEDICATIONS:**

#### **A. Standing Orders.**

(1) A physician employed or authorized by the department, may prescribe a standing order in the name of the school or school district for a stock supply of albuterol aerosol canisters and spacers, or a stock supply of standard-dose and pediatric-dose epinephrine auto-injectors for use in accordance with this rule.

(2) Each local school board or governing body may request a standing order for and may provide to schools within its jurisdiction stock supplies of albuterol and epinephrine. In order to request a standing order, the school board must review and acknowledge in writing the rules and recommendations developed by the department for emergency medication use. All requests for standing orders must be in writing to a department approved physician. When the standing order is issued by the department approved physician, it will be sent to the requesting school district or governing body within one week of the request. A copy of the order will be kept by the department school health advocate for his or her assigned region.

(3) A pharmacist may dispense a stock supply of albuterol aerosol canisters and spacers or a stock supply of standard-dose and pediatric-dose epinephrine auto-injectors pursuant to a standing order prescribed in accordance with this section. Medications may be directly obtained from the pharmacy by a school in accordance with the school's established procedure.

(4) All standing orders are renewed annually.

**B. Storage provisions:** School districts and schools that decide to maintain and administer emergency medications will establish a Class D Medication Room in each school that stocks emergency medications

in compliance with New Mexico BOP regulations. Schools that maintain a Class D Medication Room license will be required to complete an annual medication room audit and submit it to the BOP.

(1) **Albuterol** - Each school that obtains a stock supply of albuterol aerosol canisters and spacers shall store them:

- (a) in a secure location that is unlocked and readily accessible to a school nurse to administer albuterol;
- (b) pursuant to BOP regulations, including requirements for storage, record maintenance, and medication room audits or consulting pharmacist's visits;
- (c) within the manufacturer-recommended temperature range; and
- (d) albuterol will be secured in a manner consistent with the procedure employed by the school nurse for other emergency medications; the medication cabinet, which is kept in the school nurse's office, is kept unlocked when the school nurse or school health assistant are present in the office; if the school nurse or school health assistant are not present, the school nurse's office will be locked.

(2) **Epinephrine** - Each school that obtains a stock supply of standard-dose and pediatric-dose epinephrine auto-injectors shall store them:

- (a) in a secure location that is unlocked and readily accessible to trained personnel;
- (b) pursuant to BOP regulations including requirements for storage, record maintenance, and medication room audits or consulting pharmacist's visits;
- (c) within the manufacturer-recommended temperature range; and
- (d) epinephrine will be stored in a secure, unlocked location determined by the school nurse or principal; this location should be easily accessed by trained school personnel in the event of an emergency situation; a location is considered secure for the purposes of epinephrine storage if school staff are present full-time in that location; for example, the secretary's office or the main office.

**C. Disposal:** Albuterol and epinephrine - Each local school board or governing body shall dispose of expired emergency medication pursuant to BOP regulations. Expired medications will be placed in a separate, quarantined section of the medication room and disposed of per the Class D Medication Room regulations.

- (1) The school will be responsible for proper disposal of expired medications.
- (2) The BOP is a resource for direction in proper disposal of expired medications.
- (3) Expired medications may be disposed of either by using a consultant pharmacist or by transferring the medications to a pharmacy with an appropriate transfer log.

**D. Procurement and maintenance of emergency medications.**

(1) A local school board or a school within its jurisdiction of a governing body may accept gifts, grants, bequests, or donations from any source to carry out the provisions of this rule, including:

- (a) albuterol aerosol canisters and spacers or epinephrine auto-injectors from a manufacturer or wholesaler; or
- (b) epinephrine or albuterol, or such other medication as the department deems appropriate, from a manufacturer or wholesaler of such medication; and
- (c) this type of donation can be accepted if the medications are not expired and have been maintained properly.

(2) School districts or governing bodies may buy prescribed medications directly from pharmacies after obtaining a standing order.

(3) Schools will keep a record of any grants, gifts, bequests, or donations. The record is to be held at the school in the school office for three years and can be inspected by BOP, department personnel, and school administrative personnel upon request. The records will be kept in the school health office by the school nurse or school leader. Records may be kept electronically or in hard copy.

(4) Schools will maintain a supply of emergency medications:

- (a) the supply will be replenished as medications are used according to the procedure in 7.30.12.8 NMAC; and
- (b) medications in stock will be checked to verify that medications are not expired.

[7.30.12.8 NMAC - N, 02/27/2015 A/E, 2/23/2026]

**7.30.12.9 TRAINING:** Schools and school districts that decide to maintain and administer emergency medications will follow the department rules and recommendations, according to the following guidelines:

**A. Use of albuterol:**

(1) School nurses will complete training on administering albuterol reviewed and approved by the department;

(2) current school nurses will complete the training at a minimum of one time and as determined by the department; new school nurses will complete the training as part of their orientation process, and then as determined by the department; and

(3) refresher trainings on albuterol may be recommended by the department, at a minimum of every five years.

**B. Use of epinephrine:**

(1) school personnel, including non-licensed personnel, will complete training on administering epinephrine that is reviewed and approved by the department;

(2) current school nurses will complete the training one time and new school nurses will complete the training as part of their orientation process;

(3) non-licensed personnel will complete the training annually; and

(4) refresher trainings on epinephrine for school nurses may be recommended by the department, at a minimum of every five years.

**C.** Training will be documented and a training log will be kept at each school in the school health office for a minimum of five years. Training records may be maintained electronically or in hard copy.

[7.30.12.9 NMAC - N, 02/27/2015 A/E, 2/23/2026]

**7.30.12.10 ADMINISTRATION OF EMERGENCY MEDICATIONS:**

**A. Use of albuterol:**

(1) only a school nurse, who has completed the requisite training, will administer inhaled albuterol on an emergency basis;

(2) if no school nurse is available, immediately call 911;

(3) inhaled stock albuterol will be given for treatment of respiratory distress only when the student is experiencing respiratory distress, per criteria that will be covered in training, and does not have medication available; albuterol may be administered to students who have not previously been diagnosed with conditions leading to respiratory distress and students who have a history of respiratory disease but do not have medication at school;

(4) when stock albuterol is used, 911 will be called immediately to activate the emergency response system;

(5) after administration of albuterol, the student's condition will be continuously monitored, and any additional treatment indicated will be given until an emergency medical system responder arrives;

(6) as soon as practicable, the parent, guardian, or legal custodian of the student having respiratory distress will be notified by phone or in accordance with contact information on file at the school;

(7) a log will be kept of when albuterol is used and the outcome of the student; these logs will be kept in the school health office at least five years; logs will be available for review upon request, per applicable federal and state privacy laws; logs will be maintained by the school nurse; logs may be either electronic or hard copy; and

(8) an adverse events form will be completed when albuterol is administered on an emergency basis; the form will be submitted within three working days to the regional school health advocate or the regional health officer; adverse events forms will be maintained by the department for a minimum of five years.

**B. Use of epinephrine:**

(1) school personnel, including non-licensed personnel, who have completed the requisite training, may administer epinephrine on an emergency basis;

(2) epinephrine will be given for treatment of severe anaphylactic reactions only when the student is experiencing signs of anaphylaxis, per criteria that will be covered in training, and does not have medication available; this includes students who have not previously been diagnosed with conditions leading to anaphylaxis and students who have a history of anaphylaxis and who do not have medication at school;

(3) each school that receives a stock supply of standard-dose and pediatric-dose epinephrine auto-injectors shall:

(a) develop and implement a plan to have one or more trained personnel on the school premises during operating hours, which includes class time and after school activities; and

(b) follow an anaphylactic reaction prevention protocol, as recommended by the department, to minimize an allergic student's exposure to food allergies.

(4) when stock epinephrine is used, 911 will be called immediately to activate the emergency response system;

(5) after administration of epinephrine, the student's condition will be continuously monitored and any additional treatment indicated will be given until an emergency medical system responder arrives;

(6) as soon as practicable, the parent, guardian, or legal custodian of the student will be notified by phone or in accordance with contact information on file at the school;

(7) a log will be kept of when epinephrine is used and the outcome of the student; these logs will be kept in the school health office at least five years; logs will be available for review upon request, per applicable federal and state privacy laws; logs will be maintained by the school nurse or school leader; logs may be either electronic or hard copy;

(8) an adverse events form will be completed when epinephrine is administered on an emergency basis; the form will be submitted within three working days to the regional school health advocate or the regional health officer; adverse events form will be maintained by the department for a minimum of five years. [7.30.12.10 NMAC - N, 02/27/2015 A/E, 2/23/2026]

### **7.30.12.11 PREVENTION**

**A.** A vital part of the emergency medication in schools programs is preventing respiratory distress and severe allergic reactions.

**B.** Recommendations will be developed by the department for school districts to use in the development of policies and procedures addressing both the use of the medications and prevention of respiratory distress and severe allergic reactions. The recommendations document will be issued upon request to interested school districts and governing bodies. The document will be available online through the office of school and adolescent health's website at <http://nmhealth.org/about/phd/hsb/osah/>.

**C.** The following resources are available for schools to use in developing prevention strategies, and can be obtained from the office of school and adolescent health's website at <http://www.nmhealth.org/about/phd/pchb/osah/> or by contacting the office at 300 San Mateo Blvd. NE, Suite 902, Albuquerque, NM 87108:

(1) the environmental protection agency's "indoor air quality: tools for schools;"

(2) the centers for disease control and prevention's "voluntary guidelines for managing food allergies in schools and early care and education programs;" or

(3) the centers for disease control and prevention's toolkit "**initiating change: creating an asthma-friendly school.**"

**D.** Other resources are available through the department's asthma control program as well as the office of school and adolescent health.

[7.30.12.11 NMAC - N, 02/27/2015 A/E, 2/23/2026]

**HISTORY OF 7.30.12 NMAC: [RESERVED]**