Health Requirements and Services Medical Treatment

School Consent to Medical Treatment—

The school in which a minor student is enrolled may consent to medical treatment of that student, provided:

1. The person having the power to consent as otherwise provided by law cannot be contacted.
2. Actual notice to the contrary has not been given by that person.

Utah Code § 78B-3-406(6)(c) (2024)

Form of Consent—

Consent to medical treatment under this policy shall be in writing, signed by the school official giving consent, and given to the doctor, hospital, or other medical facility that administers the treatment.

Administering Medication—

Specific requirements and procedures set forth in following sections of this policy apply to administration of seizure rescue medication and adrenal crisis rescue medication. Specific requirements and procedures are provided in Policy FDACB for glucagon for hypoglycemic emergencies, Policy FDACC for injectable epinephrine rescue medication for allergy emergencies, and in Policy FDACD for administration of albuterol for asthma emergencies. For any other medications, employees of the District may administer medication to a student during periods when the student is under the control of the school, subject to the following conditions:

1. The District has received a current written and signed request to administer the medication during regular school hours to the student from the parent or

other person having legal control of the student.

2. The student's physician, dentist, nurse practitioner or physician assistant has provided a signed statement describing the method, amount, and time schedule for administration, and a statement that administration of medication by school employees during periods when the student is under the control of the school is medically necessary.
3. Oral, topical, and inhalant medication may be administered by assigned school personnel. Medications requiring other routes of administration will not be given by school personnel except in emergency situations. In non-emergency situations, medications requiring other routes of administration must be given by a registered nurse.
4. All medication that is to be given at school, with the exception of medication that is required in an emergency situation, must be furnished by the parent and delivered to the school by a responsible adult.
5. All prescription medication must be in the original container labeled by the pharmacy with the name of the student, the name of the physician, the name of the medication, the amount to be given (dose), and the duration of the treatment. Over-the-counter drugs must be in the original bottle and labeled with the student's name.
6. All medication provided to the school is to be kept in a secure location.
7. Insofar as possible, one person should be assigned the responsibility of administering student medication.
8. A record including the type of medication, amount, and the time and day it was administered should be kept for each student receiving medication at school. The person administering the medication should sign the record each time medication is given.
9. Elementary and middle school students are not to carry or self-administer medication on school premises unless it has been authorized under Policy FDACB (for diabetes medication) or FDACC (for injectable epinephrine) or

Policy FDACD (for asthma medication) or is expressly ordered by the student's physician because of potentially life-threatening circumstances, including, but not limited to, asthma medication, diabetes medication, and glucagon. (Students may possess and self-administer epinephrine nasal spray.)

10. Authorization for administration of medication by school personnel may be withdrawn by the school at any time following actual notice to the student's parent.
11. School personnel who provide assistance under this policy in substantial compliance with the physician's or dentist's written statement and the District are not liable, civilly or criminally, for any adverse reactions suffered by the student as a result of taking the medication or discontinuing the administration of the medication pursuant to this policy.

Utah Code § 53G-9-502 (2025)

The Board shall consult with the Department of Health and Human Services and other health professionals to determine:

1. Designation of employees who may administer medication.
2. Proper identification and safekeeping of medication.
3. Training of designated employees.
4. Maintenance of records of administration.

Utah Code § 53G-9-502(1)(a) (2025)

Civil Liability Immunity—

School personnel shall substantially comply with the health care professional's written statement in order that they and the District and Board may take full advantage of the immunity from liability granted under Utah Code § 53G-9-502(3).

Utah Code § 53G-9-502(3) (2024)

Administration of Seizure Rescue Medication—

The following provisions govern administration of seizure rescue medication in place of the provisions set forth above under “Administering Medication.” “Seizure rescue medication” is medication prescribed by a health care professional which is given as set out in a student’s rescue seizure authorization while a student is experiencing seizure activity. It does not include medication given intravenously or intramuscularly.

A “seizure rescue authorization” is a student’s individualized healthcare plan which:

1. Certifies that

a. A prescribing health care professional has prescribed a seizure rescue medication for the student; and

b. The student’s parent has previously administered the student’s seizure rescue medication without complication in a setting outside of medical supervision; and

c. The student has previously ceased having full body prolonged or convulsive seizure activity as a result of receiving the seizure rescue medication; and

2. Describes the specific seizure rescue medication authorized for the student, including the indicated dose and instructions for administration; and

3. Requests that the school identify and train school personnel who volunteer to be trained to administer seizure rescue medication; and

4. Authorizes a trained school employee volunteer to administer seizure rescue medication to the student.

After receiving a seizure rescue authorization from a student’s parent, the school shall:

1. Inform school employees of the opportunity to be a school employee

volunteer to administer seizure rescue medication;

2. Provide for training of each volunteer in the administration of seizure rescue medication, with training provided by the school nurse or another qualified, licensed medical professional. The training shall be according to the program developed by the Utah Department of Health and Human Services, which will include:

a. Techniques for recognizing the symptoms that warrant the administration of a seizure rescue medication;

b. Standards and procedures for the storage of a seizure rescue medication;

c. Other emergency procedures, including calling 911 and contacting the student's parent or guardian;

d. An assessment to determine competency to administer seizure rescue medication;

e. An annual refresher training component; and

f. Written materials describing this information.

5. Retain for reference the written materials prepared for training personnel; and

6. Permit school personnel to possess or store prescribed seizure rescue medication so that it will be available for administration.

A volunteer school employee who has received the required training may administer seizure rescue medication to a student with a seizure rescue authorization if:

1. The student is exhibiting a symptom, described on the student's seizure rescue authorization, that warrants the administration of a seizure rescue medication; and

2. A licensed health care professional is not immediately available.

A person who administers a seizure rescue medication in accordance with this policy shall direct a responsible person to call 911 and take other appropriate

actions in accordance with the seizure rescue medication administration training.

A volunteer school employee who in good faith administers a seizure rescue medication in accordance with this policy and Utah Code § 53G-9-505 is not liable in a civil or criminal action for an act taken or not taken under that authority. Policy FHA, Safe Schools, and Policy FHAA, Safe Schools: Alcohol and Drugs do not apply to the possession of a seizure rescue medication.

Utah Code § 53G-9-505 (2024)

Utah Code § 53G-9-502(4)(b) (2025)

Seizure Awareness Training—

"Seizure awareness training" is training on recognizing the signs and symptoms of seizures and appropriate training for seizure first aid. This training shall be offered once every three years and shall follow guidelines for such training established by the State Board of Education. The training may not require a person who has received the training to provide first aid to a student experiencing or showing symptoms of a seizure.

Utah Code § 53G-9-213(1)(b), (3), (4) (2024)

Whenever a student has informed the student's teacher or school that the student has epilepsy or a similar seizure disorder, the student's teacher(s) and the administrator of the school where the student attends shall be provided seizure awareness training.

Utah Code § 53G-9-213(1)(a) (2024)

All District administrators, teachers, classroom aides and other individuals who interact with or supervise students shall be given seizure awareness training.

Utah Code § 53G-9-213(2) (2024)

The fact that a District employee has received seizure awareness training does not impose on such an employee an obligation to provide first aid to a student

experiencing or showing symptoms of a seizure.

Utah Code § 53G-9-213(4) (2024)

Administration of Adrenal Crisis Rescue Medication—

The following provisions govern administration of adrenal crisis rescue medication in place of the provisions set forth above under “Administering Medication.” “Adrenal crisis rescue medication” is medication prescribed by a health

care professional which is given as set out in a student’s adrenal crisis rescue authorization during adrenal crisis activity.

An “adrenal crisis rescue authorization” is a student’s individualized healthcare plan which:

1. Certifies that a prescribing health care professional has prescribed an adrenal crisis rescue medication for the student; and
2. Describes the specific adrenal crisis rescue medication authorized for the student, including the indicated dose and instructions for administration; and
3. Requests that the school identify and train school personnel who volunteer to be trained to administer adrenal crisis rescue medication; and
4. Authorizes a trained school employee volunteer to administer adrenal crisis rescue medication to the student.

After receiving an adrenal crisis rescue authorization from a student’s parent, the school shall:

1. Inform school employees of the opportunity to be a school employee volunteer to administer adrenal crisis rescue medication;
2. Provide for training of each volunteer in the administration of adrenal crisis rescue medication, with training provided by the school nurse or another qualified, licensed medical professional. The training shall be according to the program developed by the Utah Department of Health and Human Services, which will include:

a. Standards and procedures for the storage of an adrenal crisis rescue medication;

b. Other emergency procedures, including calling 911 and contacting the student's parent or guardian;

c. An assessment to determine competency to administer adrenal crisis rescue medication;

d. An annual refresher training component; and

e. Written materials describing this information.

3. Retain for reference the written materials prepared for training personnel; and

4. Permit school personnel to possess or store prescribed adrenal rescue medication so that it will be available for administration.

A volunteer school employee who has received the required training may administer adrenal crisis rescue medication to a student with an adrenal crisis rescue authorization if:

1. The student is exhibiting a symptom, described on the student's adrenal crisis rescue authorization, that warrants the administration of an adrenal crisis rescue medication; and

2. A licensed health care professional is not immediately available.

A person who administers an adrenal crisis rescue medication in accordance with this policy shall direct a responsible person to call 911 and take other appropriate actions in accordance with the adrenal crisis rescue medication administration training.

A volunteer school employee who in good faith administers an adrenal crisis rescue medication in accordance with this policy and Utah Code § 53G-9-507 is not liable in a civil or criminal action for an act taken or not taken under that authority.

Policy FHA, Safe Schools, and Policy FHAA, Safe Schools: Alcohol and Drugs do not apply to the possession of an adrenal crisis rescue medication.

Utah Code § 53G-9-507 (2024)

Utah Code § 53G-9-502(4)(d) (2025)

Administration of Opiate Antagonist Medication—

A person who acts in good faith to administer an opiate antagonist to an individual that the person believes is experiencing an opiate-related drug overdose event is not liable for civil damages for acts or omissions made as a result of administering the opiate antagonist.

Utah Code § 26B-5-509(1)(a)(ii) (2023)

Utah Code § 53G-9-502(4)(c) (2025)

Application of Sunscreen—

If a student is unable to self-apply sunscreen, a volunteer school employee may apply the sunscreen on the student if the student's parent provides written consent for that assistance. If such consent has been given, neither the volunteer school employee nor the District are liable for an adverse reaction suffered by the student because of sunscreen application or for discontinuing the application of sunscreen at any time.

Utah Code § 53G-9-208(3), (4) (2020)