Escambia County School District Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Health Services Online Training School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2023-2024 Post Test Fax Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_

1. The acceptable time window for administering a prescribed medication in the school setting is:

a. 15 minutes before to 15 minutes after the scheduled time.

b. 30 minutes before to 30 minutes after the scheduled time.

c. 45 minutes before to 45 minutes after the scheduled time.

d. 60 minutes before to 60 minutes after the scheduled time.

2. Which prescribed medication listed below **cannot** be carried and self-administered by students

(even if they have physician and parent authorization)?

a. Inhalant b. Epinephrine Auto-injector

c. Pancreatic Enzyme d. Ritalin

3. Before administering a medication you must check the 8 rights. List them:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. It is okay to share medical information about a student with school district staff who have a legitimate educational need to know.

a. True b. False

5. If a medication error is made (including a missed medication),

a. Notify the principal

b. Notify the school nurse and physician if indicated

c. Notify the parent/guardian

d. Complete Medication Error Form within 24 hours and fax it to 469-5456

e. All of the above

6. If a new student with diabetes enrolls at your school

a. Notify the school nurse before the student starts classes

b. Ask the parent to show you how to care for the student

c. Tell the parent that the student needs to go to a “special school”

d. Allow the student to take care of their diabetes needs by themselves

7. If you know a better medication for a student to take, you should share that information with the

parent.

a. True b. False

8. Before accepting student’s medication from parent/guardian:

a. Complete a Dispersion of Medication form with the parent/guardian

b. Verify that the medication label is consistent with the authorization form

c. Witness the parent/guardian signature on the bottom of the form, photo ID is required

d. All of the above

9. A call to 911 must be made if a student has a seizure that lasts:

a. 1 minute or longer b. 2 minutes or longer

c. 5 minutes or longer d. 10 minutes or longer

10. A student diagnosed with a seizure disorder has a seizure at school. It lasts under 2 minutes. The parent is notified. Can the student remain at school after a time to rest?

a. Yes b. No

11. Medications should be counted upon receipt and/or when returned to parent/guardian.

a. True b. False

12. No medication can be administered at school without a completed and signed authorization form.

a. True b. False

13. Check expiration date for inhalers on the actual canister, on the syringe part of an Epinephrine Auto-injector and on the actual emergency seizure medication, not on the boxes that could be changed.

a. True b. False

14. Medical Marijuana may be administered at school by school staff as long as the parent completes

the *Dispersion of Medication* form.

a. True b. False

15. A student with a fever (100.4 degrees or higher) may take medication and remain at school until the end of the day.

a. True b. False

16. Volunteers may administer medications on field trips or during extracurricular activities.

a. True b. False

17. You are helping out in the clinic one day. A student is non-verbal and cannot tell you his name. You:

a. Look at the tick sheet to see who is scheduled to take medication at this time.

b. Ask him if his name is the name you find on the tick sheet.

c. Ask another student if they know this student’s name.

d. Contact the teacher or administrator to assist in identifying this student prior to administering

medication.