



## **HLTH105: Medication Administration in the Child Care Environment Handout**

### **Welcome to HLTH105**

This course provides detailed information on best practices and procedures for the safe, effective, lawful, developmentally appropriate administration of medications in the child care environment. Participants will learn when and why it is appropriate to administer certain medications and policies for ensuring proper authorization, instructions, and confidentiality. In addition, participants will learn best practices for administering various types of medication, as well as health/safety guidance, proper storage and handling methods, strategies for promoting positive, effective communication with families, and tips for making the whole process easier, more positive, and more enriching for children.

### **Objectives:**

By taking notes on the handout provided in this course and successfully answering assessment questions, participants will meet the following objectives as a result of taking this course:

- Recognize the roles and responsibilities of adults involved in a child's health and treatment plan
- Compare and contrast rules and recommendations for the administration of over-the-counter and prescription medications in the child care environment
- Identify the training and authorization levels required for the administration of various types of medication
- Identify key information to include in a program's medication administration policy
- Identify safe medication receipt, storage, and handling practices
- Recognize the Seven Rights of Medication Administration
- Identify recommended strategies and best practices for administering medication to children of various ages and abilities
- Recognize recommended procedures for ensuring safety and efficacy

### **References:**

1. American Academy of Pediatrics, American Public Health Association, & National Resource Center for Health and Safety in Child Care and Early Education. (2019). *Caring for Our Children: National Health and Safety Performance Standards Guidelines for Early Care and Education Programs, 4th edition*. Retrieved from <https://nrckids.org/files/CFOC4%20pdf-%20FINAL.pdf>
2. American Academy of Pediatrics. (2018). *Medication Administration in Early Care and Education Settings*. Retrieved from <https://shop.aap.org/Medication-Administration-in-Early-Care-and-Education-Settings/>
3. American Academy of Pediatrics. (2021). "Medication Safety Tips for Families." Retrieved from <https://www.healthychildren.org/English/safety-prevention/at-home/medication-safety/Pages/Medication-Safety-Tips.aspx>
4. Care Hope College. (2021). "7 Rights of Medication Administration." Retrieved from <https://www.chcollege.org/7-rights-of-medication-administration/>
5. Centers for Disease Control and Prevention. (2022). "Protect Your Children: Store & Use Medicines Safely." Retrieved from <https://www.cdc.gov/patientsafety/features/safe-medicine-children.html>
6. Freeman, N., Decker, C., and Decker, J. (2016). *Planning and Administering Early Childhood Programs, 11th edition*. Pearson.

7. Hoecker, J. (2022). "Cold medicines for kids: What's the risk?" Mayo Clinic. Retrieved from <https://www.mayoclinic.org/healthy-lifestyle/childrens-health/in-depth/cold-medicines/art-20047855>
8. Marotz, L. (2018). *Health, Safety, and Nutrition for the Young Child, 10th edition*. Cengage Learning.

### **Course Notes:**

*Use the space provided to record important information from this section of the course.*

### **Introduction to Medication Administration**

The verb **administer** has 2 distinct definitions:

- 1.
- 2.

### **Why Are Medications Used?**

#### **1. Prevent Illness or Symptoms**

#### **2. To Relieve Symptoms**

#### **3. To Treat or Control Disease**

### **Categories and Forms of Medication**

#### **Medication:**

#### **Medicine:**

### **Basic Categories of Medication**

There are 2 basic categories or types of medication:

#### **Prescription Medications**

## Over-the-Counter (OTC) Medications

Common OTC medications include:

- Fever reducers/pain relievers (ibuprofen, Tylenol, aspirin). NEVER use aspirin for children.
- Antihistamines (for treatment of cold or allergy symptoms) and Decongestants are NOT recommended for children under 6.
- Cough suppressants, expectorants, and other cold remedies are also NOT recommended for children under 6.
- Nasal drops: Saline only (otherwise, it should have a prescription).
- Eye drops: Saline only (otherwise, it should have a prescription).
- Ear drops: (should always have a prescription when used for children).
- Medications for gastrointestinal issues: many of these medications are not recommended for children, and it is best practice to require a physician's order when their usage is needed.  
**Note:** Children should not be in school or childcare with recurrent diarrhea unless a medical professional has written a notice that the child is not contagious.

### Important Note about Cold Remedies

The following information is from the [Mayo Clinic](#):

- *What about cough and cold medicines for kids?*
  - *Do not use over-the-counter medicines, except for fever reducers and pain relievers, to treat coughs and colds in children younger than 6-years-old. Also, consider avoiding the use of these medicines for children younger than 12-years-old.*
- *What about antibiotics?*
  - *Antibiotics can be used to combat bacterial infections but have no effect on viruses, which cause colds.*
- *Can any medications help treat the common cold?*
  - *An over-the-counter pain reliever, such as acetaminophen (Tylenol, others) or ibuprofen (Advil, Children's Motrin, others), can reduce a fever and ease the pain of a sore throat.*

### Other OTC Products

- 

- 

### Preventatives

## Forms of Medication

### Oral Medications

This is the common route for both prescription and OTC medications, and they come in many forms:

- **Tablets:**
- **Capsules:**
- **Liquids:**
- **There are also:**

**Topical (creams, oils, and patches to the skin)**

**Inhalants**

**Injections**

**Suppository**

**Brand Name vs. Generic Medications**

### Shared Responsibilities

***Guardians have ultimate responsibility for their children's healthcare decisions.***

## **Legal Guardian Responsibilities**

***Guardians are responsible for:***

This communication occurs:

- **Informally:**
- **Formally:**

***Guardians are responsible for:***

***Guardians are the key link between:***

## **Child Care Provider Responsibilities**

***Child care providers must develop:***

***Child care providers must be aware of and utilize:***

If ***you are uncertain in any way:***

***Get medication administration:***

## **Health Care Professional Responsibilities**

***The physician can only discuss such matters with child care providers with the guardian's written permission.***

## **Child Health Care Consultants**

## Why Administer Medication in the Child Care Environment?

[Caring for Our Children Standard 3.6.3.1](#) states:

*"The administration of medicines at the facility should be limited to:*

- a. *Prescription or non-prescription medication (over-the-counter [OTC]) ordered by the prescribing health professional for a specific child with written permission of the guardian. Written orders from the prescribing health professional should specify medical need, medication, dosage, and length of time to give medication.*
- b. *Labeled medications brought to the child care facility by the guardian in the original container (with a label that includes the child's name, date filled, prescribing clinician's name, pharmacy name and phone number, dosage/instructions, and relevant warnings)."*

Additionally:

- *"Facilities should not administer a medication that is prescribed for one child in the family to another child in the family.*
- *No prescription or non-prescription medication (OTC) should be given to any child without written orders from a prescribing health professional and written permission from a guardian. **Exception:** Non-prescription sunscreen and insect repellent always require guardian consent but do not require instructions from each child's prescribing health professional."*

***Best practice is that all medications administered in the child care environment should occur only with written orders from a health care professional with prescriptive authority and written guardian consent.***

### Vitamins

### Homeopathic and Herbal Medications

According to [Caring for Our Children Standard 3.6.3.1](#):

*"Facilities should not administer folk or homemade remedy medications or treatment."*

### Best Practices and Procedures

There is far more to medication administration than simply measuring the medicine and asking the child to drink it.

Best practices in medication administration require close adherence to detailed processes and procedures in the following areas:

### Proper Documentation

## Confidentiality and Children's Health Files

***All medical records must be confidential.***

***Permission to share health care information must be:***

## Qualifications for Staff Members who Administer Medicine

## How to Receive, Store, and Handle Medicine

### Receipt of Medication

#### Important Note about Medicine Supply

Before bringing medication to the program, guardians should know that they need a:

***In addition, medications should not be moved in and out of the child care facility daily or weekly.***

- **For OTC medications:**
- **For prescription drugs:**

**Note:** Some programs and state regulations require that a child has already taken at least one dose before the center will give the medication.

## Authorization to Give Medication

Here is the essential information any such form should include:

- 
- 
- 
-

- 
- 

**The Authorization to Give Medication Form must be:**

### Order from Health Care Professional

**The pharmacy label is NOT:**

Doctors may issue a **"standing order"** to administer an OTC medication:

It is recommended that you use this practice with extreme caution, **as it is inappropriate:**

According to guidance from [Caring for Our Children Standard 3.6.3.1](#):

*"Standing orders for medication should only be allowed for individual children with a documented medical need if a special care plan is provided by the child's primary care provider in conjunction with the standing order or for OTC medications for which a primary care provider has provided specific instructions that define the children, conditions, and methods for administration of the medication."*

*Signatures from the primary care provider and one of the child's guardians must be obtained on the special care plan. Care plans should be updated as needed, but at least yearly."*

### As-Needed?

**Ask the child's guardian or authorized health professional:**

If for whatever reason, physicians' orders are not required (which is NOT best practice):

- You still need to ensure the product's labeling and packaging are intact.
- You need to read all instructions, warnings, and indications.
- Do not use any product that is not recommended for children, has no specific dosage for children, or is not in original packaging unless accompanied by doctor's signed orders.

**Note:** For all **controlled substance** medications, count the number of pills with the guardian, or if liquid, count the number of milliliters with them and have them co-sign the count.



## Receipt of Medication Form

This is an internal form acknowledging that the staff member has received medicine from a guardian. This is basically a checklist designed to ensure caregivers follow all safety and health procedures.

The *Receipt of Medication Form* must include information showing that the staff member:

- 
- 
- 
- 

## The Receipt of Prescription Medication Form Should Include:

Make sure you can read:

- Pharmacy name and number
- Prescriber's name and number
- Prescription number
- Date prescription was filled
- Child's first and last name
- Name of medication
- Strength of medication
- Refills
- Quantity
- Manufacturer
- Expiration date
- Dosage and instructions for administration
- Instructions for storage
- Special instructions and contraindications

## The Receipt of OTC Medication Form Should Include:

Verify original packaging. As a matter of policy, many programs only accept unopened packages of OTC medication; in any case, it should be in the original packaging, not some alternative container.

- Check the package for signs of tampering. This is not possible if it is already opened, which is why many policies only accept unopened packages.
- Check the following information on packaging:
  - Product name
  - Active and inactive ingredients (for example, some products such as Excedrin may include inappropriate secondary ingredients such as caffeine)
  - Purpose and uses
  - Dosage and directions
  - Warnings
  - Expiration date
- Determine whether instructions from guardians or health professionals match product information; if not, seek clarification or explanation.
- Determine whether program policies allow medication administration without a doctor's advice/order. If they do not, require that the guardian provide the order.

When you receive any medication, be sure to ask guardians:

- When was the last time it was administered to the child?
- How is the medicine typically administered at home?
  - If the guardian is giving the medication in a way that does not match the order, do not follow suit. Require the guardian to provide you with a new order to administer the medication in that way.
- Has the child already had a dose?
- Which side-effects are expected or possible?
- Has the child exhibited any side effects so far?
  - This should be on the medical information that is provided.

## Safe Handling and Storage

### Handling

These practices may seem obvious, but in the interest of avoiding errors and accidents, always handle medication with care. Before using any medication or returning it to storage, inspect the packaging to ensure there are no cracks or leaks. Make sure the top is well secured. This helps prevent contamination of medicine and cross-contamination with other medication or materials.

- 
- 
- 
- 

### Storage

***Medicines should be kept:***

***Always read:***

### Guidelines for Refrigeration

Unless otherwise instructed, medications requiring refrigeration should be stored at:

***Storage rules apply to:***

## Designated Medication Administration Area

***A good medical administration area is:***

The medication administration area should have all the necessary supplies for:

## Procedures for Giving Medicine

## Medication Log

***This must be completed by:***

The *Medication Log* should include the following:

- 
- 
- 
- 
- 
- 
- 

## The Seven Rights of Medication Administration

The ***Seven Rights of Medication Administration*** are common knowledge and practice among nurses and are helpful for anyone administering medication in any environment.

The ***Seven Rights of Medication Administration*** are:

1. Right child
2. Right medication
3. Right dose

4. Right time
5. Right route
6. Right to refuse
7. Right documentation

### Try This!

#### Double-Double Check

Redundancy is good:

- Always read the label at least twice when administering a new medicine.
- Reread at least once every time after that, even if you give it every day. You may think you remember the dose, but you may not, especially if you administer meds to more than one child.
- Ask a colleague to read the label and verify you are using the correct dosage and device with the correct child. This is especially important the first time you administer a new medication to a child or only an occasional treatment.

#### Important Fact

If a child spits out, vomits up, or refuses to take a medication, ***do not repeat or supplement dosage*** without specific instructions from a health care professional.

***All medication incidents (e.g., child refusal, spilled medicine, partial dosage due to spitting up, or spillage) must be recorded and reported to the guardian, who may, in turn, decide to inform a health care professional.***

#### Administering the Medicine

#### Prepare Yourself

**Wash your hands or put on gloves.**

## Prepare the Medicine

***Do not make assumptions about:***

***If instructed to mix the medicine with:***

## Prepare the Child

### Administering Oral Medication

#### For infants:

- Administer before feeding unless otherwise instructed.
- Hold the infant semi-upright, supporting the head.
- Keep infants' hands away from their faces.
- Press chin gently to open mouth.
- Rock and reassure the infant.
- Using a syringe or dropper, position it on one side of the mouth along the gums and squirt slowly, allowing time for the child to swallow the entire dose.

#### For toddlers:

- Get advice from guardians on what works best for the child.
- Set expectations: toddlers are expected to cooperate and follow instructions, just like you follow the doctor's instructions.
- Offer some control, such as a choice whether to sit or stand.
- Be honest but use appropriate language.
- Let them know that they can have a sip of juice after they take the medicine.
- Thank them for their help and cooperation.

#### For older children:

***Start with a conversation,*** if possible. Turn it into a positive learning experience. As appropriate, use it to teach about body parts, disease, and health issues. Ask the child what they know about the medicine and why it is important to take it as instructed. Do not cross a privacy line here; if the cause is considered confidential or of a private nature, do not ask the child about it. Children can develop some measure of courage and self-confidence by overcoming their fears of medications. Keep it positive (never punitive), providing verbal praise for cooperation, bravery, and toughness.

Children can become ***more involved in the process*** as they develop and gain experience. When appropriate, allow children to pick up and ***self-administer*** oral medications (always under close supervision, of course!). Before that, invite them to decorate their medicine cup or maintain a medicine log in addition to the official one that you maintain to make them more aware of their treatment process.

## Administering Eye Drops

Here are some key pointers:

- Make sure your hands are clean.
- Avoid direct contact with the dropper.
- Do not worry about missed drops.
- Older children should sit in a chair and look upward with both eyes open.
- Gently pull down the lower eyelid and administer drop(s) directly onto the eye.
- Or, to a child's relaxed closed eyes, administer drops to tear ducts and encourage the child to blink.
- Older children may be taught to self-administer drops when they feel ready (with supervision, of course).
- With younger children (infants and toddlers), cradling them or having them lie down as you carefully administer drops to each eye is usually necessary. It may take some patience and several tries, or assistance from another adult, to keep the child still and compliant during the process.
- In any case, get it over with quickly but also as safely and effectively as possible.

## Administering Inhaled Medication

### Complete the Process

***Always offer:***

***Check the label:***

Once the child returns to play or is resting in an appropriate supervised area, complete the process in the following sequence:

- Return the medication to storage following proper procedures (inspect the packaging, check lid, etc.)
- Clean the measuring device or other reusable and store it properly.
- Record the time, date, and other information in the *Medication Log*.
- Properly dispose of all waste.
- Wash your hands thoroughly.
- Sanitize the area.
- Continue to observe the child for possible side effects.

**Sanitation** involves:

## Disposal

**Whenever possible, return unused or expired medications to:**

**Controlled medications** (such as Ritalin or painkillers) require:

Check out this [resource](#) to find drug take-back locations.

There are established federal standards (from OSHA) and state regulations governing the use and disposal of needles and other equipment with the potential to spread blood-borne pathogens. For example, a proper ["sharps" container](#) may be needed if a child receives injections in the child care environment.

## Identifying Side Effects

**Observing for side effects is:**

**Observation is:**

**Educate yourself.**

Common side effects of various medications can include:

- Upset stomach
- Diarrhea or loose stools
- Dry mouth
- Drowsiness
- Change in activity or mood
- Dizziness
- Flushing, sweating
- Rashes
- Rapid heartbeat
- Nausea

## Allergic Reactions

**Allergic reactions** are a potential source of serious or life-threatening side effects. A child exhibiting the following symptoms may be suffering from a severe condition known as **anaphylaxis** and requires immediate medical attention.

Call 911 if a child exhibits 2 or more of the following:

- Lungs:
  - Trouble breathing or noisy breathing
  - Coughing, wheezing
  - Sneezing
  - Congestion

- Tightness in the lungs
  - Hoarseness
- Heart and Blood Vessels
  - Chest pain
  - Low blood pressure
  - Weak, rapid pulse
  - Dizziness, fainting
- Skin
  - Pale or flushed skin
  - Hives or welts
  - Itchy skin
  - Sweating
- Mouth
  - Swelling of the throat, face, lips, or tongue
- Stomach and Digestion
  - Abdominal pain
  - Nausea, vomiting
  - Diarrhea

### How to Use an EpiPen on a Child

[HealthyChildren.org](https://www.healthychildren.org) recommends the following steps for administering an Epinephrine Auto-Injector:

1. Take the epinephrine auto-injector out of its package.
2. Remove the blue safety cap.
3. Hold the auto-injector in your fist. The needle comes out of the orange end, so be careful not to hold your hand over the end.
4. Push the end with the needle firmly against the side of the child's thigh, about halfway between the hip and knee. Inject the medicine into the fleshy outer portion of the thigh. Do not inject into a vein or the buttocks.
5. You can give the injection through clothes or on bare skin.
6. Hold the auto-injector in place until all the medicine is injected, usually no more than 3 seconds.
7. Remove the needle by pulling the pen straight out. A protective shield will cover the needle as soon as it is removed from the thigh. Put the injector back into its safety tube. Give it to EMS when they arrive.
8. Massage the area after the injection.

### Checklist: When to Call 911

- When you see signs of distress.
- When there is a loss of (or change in) consciousness.
- Blue color or difficulty breathing.
- Difficulty swallowing.
- Swelling of lips, tongue, or face, or drooling.
- Seizure activity.
- Rapidly spreading rash or hives.
- Impaired speech or mobility.
- Getting worse quickly.
- When in doubt.

### Checklist: When to Call Poison Control

- When medication is given to the wrong child.
- When the wrong medication is given to a child.
- When the wrong dose is given (overdose).
- When a medication is given by the wrong route.
- When a medication is given at the wrong time (and it results in an extra dose).



Be sure you know the child's weight, the medication details from the container, and have the child's medication administration information on hand.

### **Checklist: Minor Incidents**

After any error, mistake, or other negative incident involving medicine, do the following:

- Notify the program manager.
- Notify the guardians.
- Fill out the *Medication Incident Form*.
- Reflect on the cause of error/incident and develop a follow-up plan to avoid it in the future.

*Side effects, adverse effects, and allergic reactions must be:*

### **Additional Guidance and Potential Problems**

#### **Recommended Procedures for Ensuring Safety and Efficacy**

Medicine administration revolves around 2 basic objectives:

1. **Safety:**
2. **Efficacy:**

### **Avoidable Hazards**

Here are the most common errors:

- 
- 
- 
- 

***Problems often occur when:***

***The more often you administer medication to a child:***

Errors in medication administration can also be caused by:

- 
-

- 
- 

## Emergency Procedures for Medication Incidents/Errors

**Keep the number for Poison Control (1 (800) 222-1222) in a prominent place**, and do not hesitate to call if you have reason to believe a child has overdosed or taken the wrong medicine.

## Medication Incident Form

Possible incidents include:

- 
- 
- 
- 

***This form is completed after:***

***No matter how minor it seems, every error or accident must be:***

## Avoiding Errors and Coping with Challenges

### Communication

### When Children Refuse

***First of all:***

## Try This!

### A Few Helpful Hints

- Review the previous "Prepare the Child" information if necessary to make sure you are using a recommended, appropriate strategy.
- Keep it positive. Do not say, "*Would you rather be sick?*" Do not sound accusatory by saying, "*What, don't you want to feel better?*" Instead, give the child an opportunity to voice their concern; focus on the purpose of the medicine.
- It is okay to offer a sticker as a reward for compliance, but this should be established initially. It is not a good idea to offer a reward while a child refuses to take medicine, as this only reinforces the notion that refusal is a path to reward. If you decide to offer a reward to a child who refuses medicine, wait until the next scheduled dose, talk about the problem, and then offer the sticker as a reward for cooperation, not as a reward for refusing to take it in the first place.

**Note:** Offering stickers or other material rewards typically does not align with positive guidance principles; however, sometimes, the child's immediate health issue takes precedence over long-term behavioral development goals.

## Other Challenging Scenarios

### Inappropriate Requests

## Daily Log of Controlled Medications Administered

Use one Sheet for Each Child

School/Childcare Program \_\_\_\_\_

Child's Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Classroom \_\_\_\_\_

Medication \_\_\_\_\_ Dosage \_\_\_\_\_ Route \_\_\_\_\_

Time of day medication is to be given \_\_\_\_\_

Length of time medication is to be given: \_\_\_\_\_ Start Date \_\_\_\_\_ End Date \_\_\_\_\_

Special Instructions \_\_\_\_\_

Name of Health Care Provider Prescribing Medication \_\_\_\_\_ Phone \_\_\_\_\_

**\*All medication received must be counted and signed by staff member as well as guardian.**

Date	# of Pills Received Date & Initial (Staff & Guardian)	Time of administration	# of Pills Remaining	Initials	Comments

Staff Signature	Initials	Date

## Medication Administration in School or Child Care

The parent/guardian of \_\_\_\_\_ ask that school/child care staff give the  
(Child's name)  
following medication \_\_\_\_\_ at \_\_\_\_\_  
(Name of medicine and dosage) (Time(s))  
to my child, according to the Health Care Provider's signed instructions on the lower part of this form.

The Program agrees to administer medication prescribed by a licensed health care provider.  
It is the parent/guardian's responsibility to furnish the medication.  
The parent agrees to pick up expired or unused medication within one week of notification by staff.

Prescription medications must come in a container labeled with: child's name, name of medicine, time medicine is to be given, dosage, and date medicine is to be stopped, and licensed health care provider's name. Pharmacy name and phone number must also be included on the label.  
Over the counter medication must be labeled with child's name. Dosage must match the signed health care provider authorization, and medicine must be packaged in original container.

By signing this document, I give permission for my child's health care provider to share information about the administration of this medication with the nurse or school staff delegated to administer medication.

Parent/Legal Guardian's Name \_\_\_\_\_ Parent/Legal Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_  
Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

\*\*\*\*\*  

### Health Care Provider Authorization to Administer Medication in School or Child Care

Child's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
Medication: \_\_\_\_\_  
Dosage: \_\_\_\_\_ Route \_\_\_\_\_  
To be given at the following time(s): \_\_\_\_\_  
Special Instructions: \_\_\_\_\_  
Purpose of medication: \_\_\_\_\_  
Side effects that need to be reported: \_\_\_\_\_  
Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_  
Signature of Health Care Provider with Prescriptive Authority \_\_\_\_\_ License Number \_\_\_\_\_  
Phone Number \_\_\_\_\_ Date \_\_\_\_\_

Please ask the pharmacist for a separate medicine bottle to keep at school/child care.  
Thank you!