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Revised Policy - Vol. 16, No. 1 - February 2024

5330 - USE OF MEDICATIONS

The Board of Education shall not be responsible for the diagnosis and treatment of student illness, except as provided by this policy. The administration of prescribed medication and/or medically-prescribed treatments to a student during school hours shall be permitted only when failure to do so would jeopardize the health of the student, the student would not be able to attend school if the medication or treatment were not made available during school hours, or if the student is disabled and requires medication to benefit from their educational program.

Definitions

Medication includes all medicines prescribed by a licensed prescriber and any medication and food supplements that have been approved by the Food and Drug Administration and may be obtained over-the-counter (OTC) without a prescription from a licensed prescriber.

Treatment refers both to the manner in which a medication is administered and to healthcare procedures that require special training, such as catheterization.

Authorization

Before any prescribed medication or treatment may be administered to a student during school hours, the Board shall require a written statement from a licensed prescriber accompanied by the written authorization of the parent (see Form 5330 F1 – Parent Authorization for Prescribed Medication or Treatment). Before any nonprescribed medication or treatment may be administered, the Board shall require the prior written consent of the parent - (see Form 5330 F1a – Authorization for Non-Prescribed Medication or Treatment (Secondary Version) and Form 5330 F1b – Authorization for Non-Prescribed Medication or Treatment (Elementary Version)). These documents shall be kept in a location designated by the school administrator/principal in collaboration with the certified school nurse RN and made available to the persons designated by this policy as authorized to administer medication or treatment.

Forms shall include the student's name; date; allergies; medication name; dosage, time, and route; intended effect of medication; other medication(s) taken by the student; licensed prescriber (if applicable); licensed prescriber signature (if applicable); and parent signature.

When a student's medical condition requires a change in the prescribed medication dosage or schedule, the parent/guardian shall provide a new written medication authorization form from a licensed prescriber, and container. The parent/guardian shall give medication changes to designated personnel within an appropriate time frame.

Designated school personnel shall receive and review the emergency medication and medication authorization form and obtain authorization from the certified RN to administer medication. The student shall not attend school until the administration form and medication are received to prevent risking the safety and welfare of the student. The Student Assistance Team (SAT), Section 504, or IEP team shall consider the lack of emergency lifesaving medication(s) as child neglect.

Maintenance

Parents shall replenish long-term and emergency prescribed medication as needed and retrieve unused or expired medicine from school personnel no later than thirty (30) days after the authorization to give the medication expires or on the last day of school.

All prescribed medications shall be in the originally labeled container from the pharmacy stating the student's name; name of the medication; reason(s) for the medication (if to be given only for specific symptoms); dosage, time, route; reconstitution directions, if applicable; and the date the prescription and/or medication expires.

All OTC's falling under the school administrator/principal's supervision shall be in the original manufacturer's container with the student's name and dosage instructions affixed to the container. The school administrator/principal in collaboration with the certified school nurse RN may designate school personnel as defined in this policy to be trained to administer OTCs. The designated and trained school personnel shall undergo OTC retraining every two (2) years. The West Virginia Department of Education (WVDE) provides online training for OTC administration.

The school administrator/principal in collaboration with the certified school nurse RN shall determine a location in the building to store student medication, at the correct temperature in a secure, locked, clean cabinet or refrigerator as required. Medication administration by certified school RNs, LPNs, and trained designated school personnel shall take place in a clean and quiet environment where privacy is assured and with minimal interruptions. The initial dose of any medication should be administered at home, except for emergency medications, unless otherwise directed by the licensed prescriber and/or a court order.

The certified school RN shall be contacted immediately when a prescribed medication's appearance or dosage is questioned. The certified school RN shall take the appropriate steps to ensure the medication is safe to administer.

The certified school RN shall be contacted immediately when a student's health condition suggests that it may not be appropriate to administer the medication.

Administration

Medication administration steps shall be followed exactly as outlined in West Virginia Board of Education (WVBE) policy 2422.7 and shall comply with the Basic and Specialized Health Care Procedure Manual for West Virginia Public Schools.

Only employees of the Board who are licensed health professionals or who have completed a drug administration training program conducted by a certified school RN and are designated by the Board may administer prescription drugs to students in school. School personnel shall be retrained every two (2) years.

A special education employee hired on or after July 1, 1989, may be required to administer medications after receiving required training. Other school employees may elect to administer medications after receiving the required training.

The following staff members may be designated as being authorized to administer medication and treatment to students after receiving required training:

- A. (x) administrator/principal

- B. (x) teacher
- C. (x) school nurse RN
- D. (x) LPN
- E. (x) building secretary
- F. (x) aide
- G. (x) transportation employee

x] Additionally, the Board shall permit the administration by a licensed nurse or other authorized staff member of any medication requiring intravenous or intramuscular injection or the insertion of a device into the body when both the medication and the procedure are prescribed by a licensed prescriber and the nurse/authorized staff member has completed any and all necessary training.

No student shall be allowed to provide or sell any type of over-the-counter medication to another student. Violations of this rule shall be considered violations of Policy 5530 - Substance Abuse Prevention, Policy 5500 - Student Code of Conduct, and Policy 5600 - Student Discipline.

Self-Administration

Self-administration of medication shall be permitted under WV Code 18-5-22a, 18-5-22b, and 18-2K-1 et seq. when all of the following conditions are met:

- A. A written medication authorization form is received from the parent and licensed prescriber permitting self-administration of medication.
- B. The student has demonstrated the ability and understanding to self-administer medication by passing an assessment by the certified school RN evaluating the student's technique of self-administration and level of understanding of the appropriate use of the medication.
- C. The parent/guardian has acknowledged in writing that they have read and understood a notice provided by the Board stating that the school, the Board, and its employees and agents are exempt from any liability, except for willful and wanton conduct, resulting in injury arising from the self-administration of medication.

The permission to self-administer medication shall be sufficient during the school year for which it is granted. All documents related to the self-administration of medication shall become part of the student's health record.

The student shall demonstrate the ability and understanding to self-administer medication by passing an assessment by the certified school RN evaluating the student's self-administration and understanding the appropriate use of the medication.

The permission to self-administer medication may be suspended or revoked if the certified school RN finds that the student's technique and understanding of the use of medications is not appropriate or is willfully disregarded.

A student may carry and self-administer properly authorized medication, such as a metered dose inhaler, epinephrine auto injector, prescribed pancreatic enzyme supplement, insulin, and/or may carry diabetic supplies and equipment to manage and care for their diabetes.

Off-Site Administration

Schools should develop a mechanism to provide for participation by all students, especially those with specialized health care needs, in school-related travel and field trips. This mechanism should include advance notification to the certified school RN and/or ~~District-County~~ District school health services director to ensure out-of-state destinations allow reciprocity and delegation of certain health care procedures by their state board of nursing laws and practice acts since the certified school RNs are licensed to practice nursing only in West Virginia. The Board may consider allowances and reimbursement to certified school RNs and LPNs to hold a compact nursing license, allowing nursing practice in multiple states to support classroom field trips. The school administrator/principal shall coordinate development of procedures for the administration of medication during curricular or co-curricular events

with classroom teachers, school nurses, parents, designated qualified personnel and administrator's designees. Designated qualified personnel who are providing medication administration for a one-time curricular or co-curricular event shall be exempt from the requirements of CPR and AED certification and first aid training.

Medication Errors

The certified school RN and administrator/principal shall be contacted immediately in the event of a medication administration error. Medication administration errors include but are not limited to, any deviation from the instructions provided by the licensed health care provider. The school nurse or administrator/principal shall do the following in the event of a medication administration error:

- A. Contact the licensed prescriber, parent, and if necessary, emergency medical services.
- B. Notify the certified school RN or school administrator/principal of recommendation and/or licensed prescriber order in response to a medication incident administration error incident.
- C. Document all circumstances, orders received, actions taken, and student's status.
- D. Submit a written report to the school administrator/principal and ~~District County~~ District Superintendent at the time of the medication error. The report should include the student's and parents name and phone number, a specific statement of the medication error, the person notified, and the remedial actions.

Emergency Medication

The West Virginia RN board and WV Code allows for the delegation of specific prescribed emergency medication. The following emergency medications have been approved for certified school RNs to determine the ability to delegate, train and continuously supervise school personnel to administer when a diagnosis and order are in place and the certified school RN or LPN is not available to provide such care:

- A. glucagon;
- B. epinephrine (see Policy 3165 and Policy 4165 – Use of Epinephrine Auto-Injectors by Personnel);
- C. albuterol or other emergency asthma medication;
- D. opioid antagonist;
- E. certain seizure medication can only be delegated to unlicensed school personnel if ordered by the student's physician and the certified school RN provides the final determination to allow delegation.

~~Schools may only stock medications as permitted by~~ It is permissible by Board policy only for schools to stock epinephrine and opioid antagonist medications per WV Code 18-5-22c (epinephrine) and WV Code 16-46-1 through 16-46-6 (opioid antagonists). The procedures and protocols for school health and school nursing, as set forth in Chapter 18 of the WV Code and outlined in WVBE policy 2422.7 shall be followed.

To meet qualifications for administering medications the school administrator/principal shall provide scheduled time for designated school personnel to become CPR with AED certified as well as trained in first aid according to WVBE policy 2422.7

[x Opioid Antagonist Supply and Administration

The ~~District County~~ District shall stock and maintain a supply of opioid antagonists.

~~The storage and administration of opioid antagonists shall be in accordance with training and stocking protocols provided by the West Virginia Department of Health and Human Resources (WVDHHR) and/or West Virginia State Health Office.~~

Naloxone training and stocking protocols shall be allowed under a written standing order from the State Health Officer. Certified RNs shall receive Naloxone training either in person or through online education with the State Health Officer or an appointed entity by the State Health Office.

Certified school RNs shall be trained in the storage and use of opioid antagonists in the school setting. Certified school RNs have the authority to train non-medical school personnel to administer opioid antagonists in emergency situations. An opioid antagonist may be administered to any student or staff suspected of having an opioid-related drug overdose.

A certified school RN, licensed nurse, or designated trained non-medical school personnel who administers an opioid antagonist in the school setting, shall not be held liable for civil damages ~~which~~ that may result from acts or omissions relating to the use of the opioid antagonist ~~which~~ that may constitute ordinary negligence; nor shall the school personnel be subject to criminal prosecution which may result from acts or omissions in the good faith administration of an opioid antagonist (West Virginia Good Samaritan Law, WVCode 16-47-1). This does not apply to acts or omissions establishing gross negligence or willful or wanton conduct.

No individual shall be subject to disciplinary action for refusing to be trained in the administration of an opioid antagonist.

Following the administration of an opioid antagonist in the school setting, the certified school RN, licensed nurse, or designated trained non-medical school personnel shall:

- A. Ensure the individual administered the opioid antagonist is transported to an emergency department;
- B. Complete and submit documentation required by the Board;
- C. Complete and submit the administration of naloxone report to the West Virginia Poison Center: 1-800-222-1222. (West Virginia state law requires that naloxone administration be reported to the Poison Center.); and
- D. Notify student support staff services, school counselor, school psychologist, and/or school administrator to provide substance abuse prevention resources to the overdose victim and family, as appropriate.

[END-OF-OPTION]

Emergency Allergy Treatment Educational Training Programs

Educational training programs in the County pertaining to emergency allergy treatment required by State law shall be conducted by a nationally recognized organization experienced in training laypersons in emergency health treatment or an entity or individual approved by the WVDHHR. The curriculum shall include at a minimum:

- A. recognition of the symptoms of systemic reactions to food, insect stings, and other allergens; and
- B. the proper administration of a subcutaneous injection of an epinephrine auto-injector.

[] Epinephrine Supply and Administration

~~The District County District shall stock and maintain a supply of epinephrine auto-injectors for use in emergency medical care or treatment of a student or school personnel for an anaphylactic reaction during the school day () and during extracurricular events outside the school day. The epinephrine auto-injectors shall be stored in accordance with the epinephrine auto-injector's instructions. The school shall designate employees or agents who are trained to be responsible for the storage, maintenance and general oversight of epinephrine auto-injectors. Epinephrine auto-injectors shall be maintained by the school in a secure unlocked location that is only accessible to certified school RNs, health care providers and authorized nonmedical personnel, and not by students.~~

~~Certified school RNs are authorized to administer an epinephrine auto-injector to a student or school personnel during regular school hours or at a school function when the certified school RN medically believes the individual is experiencing an anaphylactic reaction. A certified school RN may also use the school supply of epinephrine auto-injectors that meet the requirements of a prescription on file with the school for a student or school personnel.~~

~~Designated qualified school personnel () and, school transportation employees (including bus drivers) [END-OF-OPTION], who have been trained in the administration of an epinephrine auto-injector by the certified school RN and who have been designated and authorized by the school to administer the epinephrine auto-injector to a student or school employee during regular school-related events when the school personnel reasonable believes,~~

based upon their training, that the individual is experiencing an anaphylactic reaction may administer epinephrine. Designated qualified school personnel also may use the school supply of epinephrine auto injectors for a student or school personnel authorized to self-administer that meet the requirements of a prescription on file with the school.

[DRAFTING NOTE: Select only if school transportation employees were selected above.] (-)

Transportation employees, including bus drivers, shall not be eligible to receive the additional pay provided in WV Code 18-5-22(E).

Prior notice to the parent of a student of the administration of the epinephrine auto-injector is not required.

Immediately following the administration of the epinephrine auto-injector, the school shall provide a comprehensive notification to the parent of a student who received an auto-injection. The comprehensive notification should include date and the approximate time the incident occurred, symptoms observed, who administered the injection, the rationale for administering the injection, the response to the epinephrine administration, the dose of epinephrine administered, the current location of the student and other necessary elements to make the student's parents fully aware of the circumstances surrounding the administration of the injection and the student's subsequent health status.

All schools are required to report each incident resulting in the administration of epinephrine injections in their district county/district. Schools shall also report other administration errors. The incident shall be reported to the West Virginia Poison Center by calling 800-222-1222 after emergency medical services have transported the student or staff member to acute care. The notification should include:

- A. the name of the student;
- B. the student's age and gender;
- C. date and the approximate time the incident occurred;
- D. symptoms observed;
- E. who administered the injection;
- F. the name of the school the student attends;
- G. a contact telephone number;
- H. the rationale for administering the injection;
- I. the response to the epinephrine administration;
- J. the dose of epinephrine administered; and
- K. any other necessary elements to provide a complete report for the individual situation.

The West Virginia Poison Center will provide the data upon request to the public schools, local boards of education and annually to the State Superintendent of Schools.

A designated, trained, and authorized employee of the Board who administers or provides an epinephrine auto-injection to a person is immune from liability for any civil action arising out of an act or omission resulting from the administration of the epinephrine auto-injection unless the act or omission was the result of the individual's gross negligence or willful misconduct.

The Board may participate in free or discounted drug programs from pharmaceutical manufacturers to provide epinephrine auto-injectors to its schools.

[END OF OPTION]

Medical Cannabis

Definitions

Caregiver means the individual designated by a patient or, if the patient is under 18 years of age, an individual authorized under WV Code 16A-5-1 et seq. of this code, to deliver medical cannabis.

Certified medical use means the acquisition, possession, use, or transportation of medical cannabis by a patient, or the acquisition, possession, delivery, transportation, or administration of medical cannabis by a caregiver, for use as part of the treatment of the patient's serious medical condition, as authorized in a certification under this act, including enabling the patient to tolerate treatment for the serious medical condition.

Family or household member means the same as defined in WV Code 48-27-204.

Form of medical cannabis means the characteristics of the medical cannabis recommended or limited for a particular patient, including the method of consumption and any particular dosage, strain, variety and quantity, or percentage of medical cannabis or particular active ingredient.

Identification card means a document issued under WV Code 16A-5-1 et seq. of this code that authorizes access to medical cannabis under this act.

Individual dose means a single measure of medical cannabis.

Medical cannabis means cannabis for certified medical use as set forth in this act.

Patient means an individual who:

- A. has a serious medical condition;
- B. has met the requirements for certification under this act; and
- C. is a resident of this state.

Permit means an authorization issued by the bureau to a medical cannabis organization to conduct activities under this act.

Physician or practitioner means a doctor of allopathic or osteopathic medicine who is fully licensed pursuant to the provisions of either WV Code 30-3-1 et seq. or WV Code 30-14-1 et seq. of this code to practice medicine and surgery in this state.

Post-traumatic stress disorder means a diagnosis made as part of continuing care of a patient by a medical doctor, licensed counselor, or psychologist.

Serious medical condition means any of the following, as has been diagnosed as part of a patient's continuing care:

- A. Cancer
- B. Positive status for human immunodeficiency virus or acquired immune deficiency syndrome
- C. Amyotrophic lateral sclerosis
- D. Parkinson's disease
- E. Multiple sclerosis
- F. Damage to the nervous tissue of the spinal cord with objective neurological indication of intractable spasticity
- G. Epilepsy
- H. Neuropathies

- I. Huntington's disease
- J. Crohn's disease
- K. Post-traumatic stress disorder
- L. Intractable seizures
- M. Sickle cell anemia
- N. Severe chronic or intractable pain of neuropathic origin or severe chronic or intractable pain
- O. Terminally ill

Terminally ill means a medical prognosis of life expectancy of approximately one year or less if the illness runs its normal course.

Medical Cannabis on School Property or at a School-Related Event

The use of medical cannabis on school property or at a school-related event by students is regulated by 126 WV Code of State Rules 126-25A-14.13.

A parent of any student who has been issued a medical cannabis identification card by the West Virginia Department of Health and Human Resources, Bureau for Public Health, and who has been issued a physician certification to use medical cannabis as part of the treatment of a serious medical condition, shall notify the school principal before medical cannabis may be administered on or in school property or at a school-related event. Such notification shall be on a form that shall include the name of the student and the name and contact information for the student's caregiver. In addition to such notification, a parent shall provide the following documentation to the school principal:

- A. the student's identification card issued by the West Virginia Department of Health and Human Resources, Bureau for Public Health, pursuant to the Medical Cannabis Act, WV Code 16A-1-1, et seq.;
- B. the caregiver's identification card issued by the West Virginia Department of Health and Human Resources, Bureau for Public Health, pursuant to the Medical Cannabis Act, and
- C. a certification issued by a physician who is registered with the West Virginia Department of Health and Human Resources, Bureau for Public Health, that authorizes the use of medical cannabis by the student and that meets the requirements of WV Code 16A-4-3 and 16A-4-4.

The notification and documentation specified above shall be updated at least annually by the student's parent.

A parent shall provide written notice to the school principal within ten (10) days of any of the following:

- A. a change in the student's designated caregiver;
- B. a change in the student's physician for the purpose of certifying medical cannabis use by the student;
- C. if the student ceases to have a serious medical condition for which medical cannabis may be used; or
- D. if the student's, caregiver's or certifying physician's identification card, registration or other authorization to use, deliver, administer, certify, or authorize medical cannabis has become void, has expired, has been suspended or revoked, or has been otherwise terminated or discontinued.

The notification and copies of the documentation specified in this policy shall be kept on file as part of the student's educational record.

Upon notification and receipt of the documentation required by this policy, a school principal shall allow a designated caregiver to administer medical cannabis to a student on or in school property or at a school-related event in accordance with a physician's certification, including the medical cannabis form or delivery route, dosage,

and timing.

Medical cannabis shall not be stored on school property nor shall it be administered by school personnel unless the student is the child or is in the legal custody of a school employee and the school employee is the student's designated caregiver.

Medical cannabis administered on or in school property or at a school-related event shall be in a form permitted by WV Code 16A-3-2 and may not be administered in dry leaf or plant form.

If medical cannabis is administered on or in school property, the designated caregiver shall abide by the school's policies and procedures for visitors to the school.

If medical cannabis is administered at a school-related event, the designated caregiver shall administer it in an area outside of the view of other students and in accordance with any policies and procedures established by the school.

A designated caregiver shall not administer medical cannabis in a manner that creates disruption to the educational environment or the school-related event, or that causes exposure to other students or persons.

A student, even if 18 years or older or emancipated, may not possess or self-administer medical cannabis on or in school property or at a school-related event. Only a designated caregiver may possess and administer medical cannabis to a student on or in school property or at a school-related event. A student who is 18 years or older or who is emancipated shall provide the notices and documentation required by this policy and shall designate a caregiver for the purposes of possession and administration of medical cannabis on or in school property or at a school-related activity.

After the designated caregiver administers medical cannabis to a student, the caregiver shall remove any remaining medical cannabis from the school property or school-related event.

As is the case with controlled or illegal substances, student possession, use, distribution, sale, or being under the influence of marijuana or marijuana derivatives is not permitted under this policy.

In accordance with WV Code 16A-15-4, a student shall not be subject to discipline solely for the lawful use of medical cannabis.

Any information received by a school pursuant to this policy related to medical cannabis and containing confidential information or personally identifiable information is protected by The Family Educational Rights and Privacy Act (FERPA) and shall become part of the student's educational record.

If the Board can reasonably demonstrate that it will lose or has lost federal funding as a result of complying with this policy related to medical cannabis may seek a waiver from the WVBE.

Failure of any school personnel to comply with this policy shall result in personnel disciplinary actions based on state and county board policies.

[] Dental Programs

~~[]The Board shall provide a Fluoride Rinse Program for students in grades K-6. The administration of fluoride rinse shall be in accordance with the WVDHHR/BPH Oral Health Program's Instruction for Conducting the Fluoride Rinse Program (www.dhhr.wv.gov/oralhealth) including record maintenance of parent/guardian permission forms and date/time of program administration including each student participating in the program.~~

~~[]All dental disease prevention programs, sponsored by the West Virginia Department of Health and administered by school employees, parents, volunteers, employees of local health counties, or employees of the West Virginia Department of Health, which utilize prescription drugs for the prevention of dental disease and which are conducted in accordance with the rules and regulations of the West Virginia Department of Health are exempt from all requirements of this policy.~~

[END OF OPTION]

Administrative Due Process

Families dissatisfied with any part of the management and/or delivery of school health services or the management and/or administration of medical cannabis during the curricular or co-curricular day and school-related events should:

- A. schedule a meeting with the certified school RN and school principal or designee; and/or
- B. follow due process procedures as outlined in WVBE policy 2419, Section 504, and/or, WVBE policy 7211, Conflict Resolution Process for Citizens.

Confidentiality Documentation and Reporting

Student information related to diagnosis, medications ordered and medications given shall be maintained according to FERPA and in such a manner that no one could view these records without proper authorization as specified in WVBE policy 4350, Procedures for the Collection, Maintenance and Disclosure of Student Data.

An individual record shall be maintained for each student needing a specialized health care procedure. It shall include the date and time the procedure was performed, any notes on events and/or interactions, and the signature of the person performing/supervising the procedure.

Certified school RNs and LPNs shall use standardized nursing terminology when recording nursing notes to establish documentation of care standards.

Student health records are educational records under FERPA guidelines. While medical information is considered highly confidential and shall be decided among county and school teams inclusive of the school RN on specific storage to ensure confidentiality and access as allowable by FERPA including legitimate educational reasons inclusive of SAT, Section 504, IEP, students' classroom teacher, bus driver, etc. The student health educational record shall be maintained two (2) years from completion of education. Records to verify implementation of Federally funded programs and services such as, but not limited to, IDEA, Section 504, etc. and to demonstrate compliance with program requirements shall be maintained for five (5) years after the activity is completed. The final educational record shall include the student health record to be in compliance with FERPA guidelines.

If a student violates this policy, action shall be based upon WVBE policy 4373 Expected Behavior in Safe and Supportive Schools, and local Board Policy 5600 – Student Discipline.

Failure of school personnel to comply with this policy and WVBE policy 2422.7 may result in disciplinary action or be identified as a deficiency in accordance with West Virginia State Board of Education policy 5310, Performance Evaluation of School Personnel.

In order to satisfy the requirements of WVBE policy 2422.7, Standards for Basic and Specialized Health Care Procedures and Standards for the Possession and Use of Medical Cannabis by a Student Procedure Manual, the Board adopts WVBE policy 2422.7 and the Procedures Manual including Appendices A and B (<http://wvde.state.wv.us/policies/>) and is incorporated by reference into this policy. The Board affirms its obligation to follow the WVBE policy 2422.7 and the manual.

Cross Reference:

po5331 - Administration of Opioid Antagonists

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Legal

20 U.S.C. 1232g

34 CFR Part 99

WV Code 16A-1-1, et seq.

WV Code 16-46-1 through 16-46-6

WV Code 18-5-22a, 18-5-22b, 18-5-22c

West Virginia State Board of Education policy 2422.7

WV Department of Health and Human Resources Naloxone Guide for School Nurses

WV Statewide Standing Order for Distribution of Naloxone by Eligible Recipient Organizations for Opioid Overdose Prevention

Cross References

po5331 - ADMINISTRATION OF OPIOID ANTAGONISTS

[NaloxonePrescriptionforOverdosePrevention-Amjad-08.10.2021 \(1\).docx \(33 KB\)](#)

[WVSN Naloxone Guide.docx \(1,831 KB\)](#)