

CONROE INDEPENDENT SCHOOL DISTRICT HEALTH SERVICES

ADMINISTER INTRANASAL MIDAZOLAM

This addendum to the medication plan for _____ (Student) will serve as consent by Student's Parent/Guardian for the administration of the drug Intranasal Midazolam as prescribed for Student by his/her healthcare provider. This document also sets out the conditions and requirements of administration of Midazolam in the school setting. Consent granted under this addendum to Student's medication plan is effective for the _____ school year only and may be renewed on an annual basis when accompanied by the appropriate healthcare provider's orders.

By signing below Parent/Guardian understands and agrees to the following as it relates to the administration of Midazolam to Student:

1. Midazolam will be stored in the Health Office of the school in which Student is enrolled.
2. A Licensed Nurse is the only person permitted by CISD to administer Midazolam.
3. EMS will be called if Midazolam is administered. If Parent/Guardian does not want Student to be transported by EMS, Parent/Guardian must arrive at school in time to sign the necessary documents so that Student can be released to Parent/Guardian.
4. Should the need for the Midazolam arise on a field trip or other school event off campus and a licensed nurse is not in attendance, EMS and Parent/Guardian will be called.
5. Should the need for Midazolam arise on school district transportation (bus) EMS and the Parent/Guardian will be called.
6. Diazepam supplied by Parent/Guardian and prescribed to Student should be maintained on the campus for use by other personnel (classroom teacher, clinic assistant) that may be designated to give medications when a licensed nurse is not available to administer Midazolam.
7. Conroe ISD will not be responsible for any side effects, drug interactions or any other unwarranted effects that are caused by the administration of Midazolam to Student.
8. Parent/Guardian must provide the school nurse with a current Midazolam kit containing a **single dose vial**.
9. Parent/Guardian must provide school with current contact information for both Parent/Guardian and the Student's healthcare provider. Parent/Guardian must also notify the school immediately if there is any change in the use of Midazolam.
10. Parent/Guardian must complete any necessary authorizations to allow District Health Services personnel to communicate with Student's healthcare provider as necessary concerning the use of Midazolam.

I authorize Conroe Independent School District:

Signature of Parent or Guardian: _____ Date: _____