

**158.836 Possession and use of medications to treat documented medical conditions -- Schools electing to keep epinephrine, injectable epinephrine devices, bronchodilator rescue inhalers, and undesignated glucagon on premises -- Policies and protocols -- Limitation of liability.**

- (1) Upon fulfilling the requirements of KRS 158.834, a student with a documented medical condition as defined in KRS 158.832 may possess and use medications to treat the documented medical condition when at school, at a school-sponsored activity, under the supervision of school personnel, or before and after normal school activities while on school properties including school-sponsored child care or after-school programs.
- (2) A student who has a documented medical condition shall have:
  - (a) Epinephrine, a bronchodilator rescue inhaler, a nebulizer, glucagon, Solu-Cortef, or other medication as prescribed by a health care practitioner and provided by his or her parent or guardian in his or her possession or in the possession of the school nurse, school administrator, or his or her designee in all school environments that the student may be in, including the classroom, the cafeteria, the school bus, and on field trips; and
  - (b) A written individual health care plan in place for the prevention and proactive management for the student in all school environments that the student may be in, including the classroom, the cafeteria, the school bus, and on field trips. The individual health care plan required under this paragraph may be incorporated in the student's individualized education program required under Pub. L. No. 94-142 or the student's 504 plan required under Pub. L. No. 93-112.
- (3)
  - (a) Each school is encouraged to keep epinephrine in a minimum of two (2) locations in the school, including but not limited to the school office and the school cafeteria, so that epinephrine may be administered to any student believed to be having a life-threatening allergic or anaphylactic reaction. Schools electing to keep epinephrine shall maintain it in a secure, accessible, but unlocked location. The provisions of this paragraph shall apply to the extent that the epinephrine is donated to a school or a school has sufficient funding to purchase the epinephrine.
  - (b) Each school is encouraged to keep a bronchodilator rescue inhaler or nebulizer in a minimum of two (2) locations in the school, including but not limited to the school office and athletic office, so that bronchodilator rescue inhalers or nebulizers may be administered to any student believed to be having asthma symptoms or respiratory distress. Schools electing to keep bronchodilator rescue inhalers or nebulizers shall maintain them in a secure, accessible, but unlocked location. The provisions of this paragraph shall apply to the extent that the bronchodilator rescue inhalers or nebulizers are donated to a school or a school has sufficient funding to purchase the bronchodilator rescue inhalers or nebulizers.
  - (c) Each school is encouraged to stock undesignated glucagon as permitted under KRS 158.837 in a minimum of two (2) locations in the school, including but not limited to the school office and athletic office, so that undesignated

glucagon may be administered to a student in accordance with the student's diabetes medical management plan as defined in KRS 158.837, Section 504 plan pursuant to the Rehabilitation Act of 1973, 29 U.S.C. sec. 794, individualized education program, or other written accommodations plan to administer glucagon to the student. Schools electing to stock undesignated glucagon shall maintain it in a secure, accessible, unlocked location and in accordance with KRS 158.837. This paragraph shall apply to the extent that the undesignated glucagon is donated to a school or a school has sufficient funding to purchase and stock undesignated glucagon.

- (d) Each school electing to keep epinephrine or bronchodilator rescue inhalers, nebulizers, or undesignated glucagon, shall implement policies and procedures for managing a student's life-threatening allergic reaction, anaphylactic reaction, asthma, or hypoglycemia, developed and approved by the local school board.
  - (e) The Kentucky Department for Public Health shall develop clinical protocols in the school health section of the Core Clinical Service Guide manual that is maintained in the county or district public health department to address epinephrine, bronchodilator rescue inhalers, nebulizers, and glucagon kept by schools under this subsection and to advise on clinical administration of the epinephrine, bronchodilator rescue inhalers, nebulizers, and glucagon. The protocols shall be developed in collaboration with local health departments or local clinical providers and local schools and local school districts.
- (4) Any school employee authorized under KRS 156.502 to administer medication shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from the administration or the assistance in the administration of epinephrine, a bronchodilator rescue inhaler, nebulizer, glucagon, Solu-Cortef, or other prescribed medication to any student believed in good faith to be having a life-threatening allergic or anaphylactic reaction, asthma symptoms or respiratory distress, hypoglycemia, or adrenal crisis.

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**History:** Amended 2026 Ky. Acts ch. 75, sec. 9, effective April 10, 2026. -- Amended 2021 Ky. Acts ch. 112, sec. 2, effective June 29, 2021. -- Amended 2013 Ky. Acts ch. 52, sec. 1, effective June 25, 2013. -- Amended 2004 Ky. Acts ch. 132, sec. 7, effective April 21, 2004. -- Created 2002 Ky. Acts ch. 50, sec. 4, effective July 15, 2002.