



Nursing Services

IN WISCONSIN SCHOOLS

Nursing Services in Wisconsin Public Schools

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Introduction

Wisconsin school districts must provide for "emergency nursing services" ([Wis. Stat. §121.02\[1\]\[g\]](#)). Wisconsin Administrative Code requires that "emergency nursing services shall be available during the regular school day and during all school-sponsored activities of pupils" ([Wis. Admin. Code § PI 8.01\[2\]\[g\]4](#)). District policies for emergency nursing services in Wisconsin schools must include protocols for dealing with student accidental injury, illness, and the administration of medication to students ([Wis. Admin. Code § PI 8.01\[2\]\[g\]2](#)). School boards are required to review and evaluate the emergency nursing services program for their district at least annually ([Wis. Admin. Code § PI 8.01\[2\]\[g\]6](#)).

About 2 in 5 United States students aged 6 to 17 have a chronic health condition such as asthma, diabetes, or epilepsy (Centers for Disease Control and Prevention, 2020). The health care needs of children with chronic health conditions can be complex and continuous and include both daily management and potential emergencies. Ensuring students have the health services they need to manage their chronic conditions while at school is important in helping them stay healthy and ready to learn.

It is the position of the National Association of School Nurses (NASN) "that the registered professional school nurse has the knowledge, skills, and expertise to assess, plan, and evaluate the health needs of students in programming and activities beyond the regular school day. All students, including those with disabilities identified in accordance with the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act, must have equal opportunity to participate in school-sponsored before, after, and extended school year programs. School-sponsored extended school year programs and before and after school programs that are a part of the school system should, at a minimum, engage the school nurse to act in an advisory capacity to address the health and safety needs of students" (NASN, 2018).

Confusion about school nursing and health practices in the school setting exists. The variability of school nurse staffing in Wisconsin and the complexity and intensity of the health needs of children and youth who require care contribute to this confusion. The Department of Public Instruction provides guidance documents regarding the [Administration of Medications in Wisconsin Schools \(2022\)](#) and [Delegation in the School Setting \(2019\)](#). This document serves to clarify the implementation of emergency school nursing services in the school setting. The information has been organized in a question and answer (Q and A) format. The answers have been formulated based on [Wis. Stat. §121.02\(1\)\(g\)](#) and [Wis. Admin. Code sec. PI 8.01\(2\)\(g\)](#). When applicable, best practice guidelines are included. Readers are encouraged to also read [Chapter 9 of the Wisconsin School Nursing Handbook](#) (Emergency Services and Crisis Preparedness).

State and Federal Laws

1. What are the primary state laws regarding emergency nursing services in Wisconsin schools?

Wisconsin law requires public school districts to "provide emergency nursing services" ([Wis. Stat. § 121.02\[1\]\[g\]](#)). [Wis. Admin. Code § PI 8.01\(2\)\(g\)](#), also known as Standard G, defines the minimum required emergency nursing services. School districts must develop emergency nursing policies and protocols dealing with the management of illness, accidental injury, and medication administration at all school-sponsored events. The emergency nursing services shall be available during the regular school day and during all school-sponsored activities of students, including but not limited to curricular, co-curricular, and extra-curricular activities. The district must secure a relationship with a licensed physician to serve as a medical advisor for emergency nursing services. Equipment supplies and space for emergency nursing services must be appropriate and readily accessible. Pupil emergency information cards must be readily accessible. School protocols should include documentation of care provided for each incident of emergency nursing service provided. School boards need to review and evaluate the emergency nursing services program at least annually ([Wis. Admin. Code § PI 8.01\[2\]\[g\]](#)). These laws do not apply to private schools.

2. Which federal laws relate to school districts' legal responsibilities for the provision of nursing procedures and health services for students?

Two federal laws provide guidance to school districts for the provision of nursing services for children with chronic health conditions or those that require specialized medical care while in school or to attend school. Section 504 of the Rehabilitation Act of 1973 is an anti-discrimination law requiring school districts to ensure that students with disabilities (as defined in [34 CFR §104.3 \[j\]](#)) have an equal opportunity to participate in academic, nonacademic, and extracurricular activities available to all students enrolled in the school district. To ensure an equal opportunity of participation for students with disabilities, school districts must develop a verbal or written plan to meet student health needs or provide accommodations relating to handicapping conditions. Although the law allows for verbal Section 504 Accommodation Plans, it is strongly recommended that the plan is in writing. This plan may include school nursing or other health services (34 CFR sec. 104.37[a][2]).

The Individuals with Disabilities Act (IDEA) is a federal law requiring school districts to provide students with a disability a free, appropriate public education ([34 CFR § 300.101](#)) by implementing an individualized educational program (IEP) designed to meet each child's unique academic, physical, and social-emotional

needs. The individualized education program must include health and nursing services if these are necessary for the student to receive a free, appropriate public education ([34 CFR § 300.34 \[c\]\[130\]](#)).

If the 504 Accommodation Plan or IEP includes school health services or school nursing services, the school district must arrange for an appropriately licensed healthcare professional to offer the service or have that person delegate the performance of the procedure to a trained unlicensed person following the state Nurse Practice Acts. Federal law defines school health services and school nurse services to mean health services that are designed to enable a child with a disability to receive a free, appropriate public education as described in the child's IEP. School nurse services are services provided by a qualified school nurse. School health services are services that may be provided by either a qualified school nurse or other qualified person ([34 CFR § 300.34 \[c\]\[13\]](#)).

3. Are Wisconsin public schools required to have a school nurse or hire a registered nurse?

School districts are required to provide "emergency nursing services" ([Wis. Stat. § 121.02\[1\]\[g\]](#)). Furthermore, [Wis. Admin. Code § PI 8.01\(2\)\(g\)](#) requires school districts to provide these services under a written policy adopted and implemented by the school board. The policies must be developed by a registered nurse licensed to practice in Wisconsin. The registered nurse should write these policies in cooperation with other school district personnel and representatives from community health agencies and services as designated by the school board. Policies for emergency nursing services must, at the very least, include protocols for dealing with pupil accidental injury, illness, and administration of medication.

The two federal laws discussed under question 2 (above) describe situations where a school district must provide the necessary nursing care for students with disabilities (IDEA and Section 504) to benefit from and access their education. In some circumstances, to comply with the Wisconsin Nurse Practice Acts (Wis. Stat. ch. [441](#) and Wis. Admin. Code ch. [N 6](#)), school districts may be required to hire a registered nurse or school nurse to perform or delegate nursing care. The provision of standard first aid or medication administration to students does not require registered nurse delegation in Wisconsin. See [Delegation in the School Setting \(2019\)](#) and [Administration of Medications in Wisconsin Schools \(2022\)](#) for a full discussion of these issues. School districts should seek legal counsel regarding whether districts are required to hire registered nurses to provide or direct emergency or other nursing services.

4. Is there a required school nurse-to-student ratio in Wisconsin?

No. It is the position of the National Association of School Nurses (NASN) that access to a registered professional nurse all day, every day, can improve students' health, safety, and educational achievement (NASN, 2020). No evidence-based school nurse-to-student ratio currently exists.

According to the NASN, factors to consider when determining staffing include:

- Safety, medical acuity, and health needs of a student
- Characteristics and considerations of students or population, including individual social needs as well as the infrastructure that creates inequities in social determinants of health
- Characteristics and considerations of the school nurse and other interprofessional team members
- Context and culture of the school or school district that influences nursing services delivered (NASN, 2020)



Policies, Procedures, and Protocols

5. Do public schools across the state have to follow similar procedures and provide health services in a consistent manner?

No. Wisconsin is a "local control" state. This means the local school board is the governing body for the school district and, as such, must develop policies, protocols, and procedures that comply with federal and state regulations. The school board is free to decide how to implement the law by considering the desires and resources of the community. Additionally, if all legal requirements are met, the school district may decide to exceed the requirements stated within the law.

6. What are the differences between policies, protocols, and procedures as they relate to emergency nursing services?

A policy is a general statement developed to pertain to multiple situations and issues. For example, a policy may read, "The school district will provide for the safety and wellness of their students during the school day." Policies require school board approval. Protocols provide information regarding clinical nursing knowledge of how to intervene in a particular health situation. Procedures are step-by-step guidance explaining how to perform a health care task. [Wis. Admin. Code § PI 8.01\(2\)\(g\)](#) requires policies and protocols.

Registered nurses licensed in Wisconsin are to develop the board policies. The emergency nursing policies shall be developed by a professional nurse or nurses registered in Wisconsin in cooperation with other school district personnel and representatives from community health agencies and services as may be designated by the board. The policies for emergency nursing services should include protocols for dealing with pupil accidental injury, illness, and administration of medication. Administration of medication to students is addressed in [Wis. Stat, § 118.29](#). See DPI's [Administration of Medications in Wisconsin Schools \(2022\)](#) for further explanation of medication administration to students.

7. What are some of the protocols schools should develop for dealing with pupil injuries?

Schools would benefit from established protocols on the following:

- head injury with significantly altered or loss of consciousness
- anaphylactic reactions
- respiratory distress or cessation
- cardiac pain or arrest
- impaled object
- human and animal bites
- trauma needing immobilization or resulting in significant blood loss
- extremely low or high blood sugars
- extremely low or high body temperatures
- ingestion of poisons
- suspected or known drug or alcohol overdose
- exposure to hazardous chemicals or materials
- conditions that have the potential for inducing shock, such as burns and internal bleeding
- potential fracture, dislocation, or sprain
- heat or cold exposure
- mouth, jaw, or eye injuries

This list is intended to be a sample of potential emergency situations and is not exhaustive. Many school districts use American Red Cross First Aid templates to develop intervention steps to respond to emergencies. The DPI website houses [the injury and illness protocols developed by the Wisconsin Improving School Health Service Project \(WISHeS\)](#).

8. What are some of the protocols schools should develop for dealing with pupil illness or other conditions?

Schools would benefit from protocols on the following:

- Asthma
- Attention Deficit/Hyperactivity Disorder
- Body and Head Lice
- Cancer
- Child Abuse
- Cystic Fibrosis
- Diabetes Type 1 and 2

- Headaches
- Human Immunodeficiency Virus
- Impetigo
- Influenza or respiratory illnesses
- Juvenile Rheumatoid Arthritis
- COVID-19
- Long COVID
- Lyme's Disease
- Measles
- Methicillin-Resistant Infections
- Pediatric Autoimmune Neuropsychiatric Disorders Associated with Streptococcal Infections
- Pertussis
- Pinworms
- Ringworm
- Scabies
- Seizures, including prolonged and continuous seizure activity
- Shingles
- Sickle Cell Anemia
- Staphylococcus Aureus
- Streptococcal Infections
- Student potential bloodborne pathogen exposure
- Suspected Pregnancy
- Tuberculosis
- Upper Respiratory Infections
- Varicella
- When to send ill students home

This list is intended to be a sample of possible conditions that would benefit from protocols and is not an exhaustive list. School districts may also benefit from developing protocols for the management and prevention of known or suspected communicable diseases. Many school districts use a current copy of the American Academy of Pediatrics *Red Book: Report of the Committee on Infectious Diseases* as a resource in the development of these protocols.

9. What are some of the policies and procedures schools may need to develop for the administration of medications?

[Wis. Stat. § 118.29\(4\)](#) addresses school medication policies. See [Administration of Medications in Wisconsin Schools \(2022\)](#).

A school board, county children with disabilities education board, cooperative educational service agency, or governing body of a private school ("governing body") whose employees or volunteers may be authorized to administer nonprescription medication products or prescription medications to students are required to adopt a written policy governing the administration of nonprescription medication products and prescription medications to students. In developing the policy, the school board, board, agency, or governing body is required to seek the assistance of one or more school nurses who are employees of the school board, board, agency, or governing body or are providing services or consultation. A school nurse is defined in [Wis. Stat. §115.001 \(11\)](#). The National Association of School Nurses (NASN) has developed evidence-based clinical practice guidelines for medication in schools (NASN 2021). It behooves school nurses to reference these guidelines when developing district policies.

As stated in [Wis. Stat. § 118.29\(4\)](#), the policy must include procedures for:

- obtaining and filing in the school the written instructions and consent required for medication administration
- periodic review of these instructions by a registered nurse
- storage of medications
- record-keeping, including documenting the administration of each dose, including errors

10. Standard G requires that emergency nursing protocols dealing with illness management, accidental injury, and medication administration be implemented at all school-sponsored activities. What are some of the events that might be included in school-sponsored activities?

Any activity that is curricular, co-curricular, or extra-curricular is considered a school-sponsored activity. Some examples of curricular, co-curricular, and extra-curricular events include field trips (in-state and out-of-state), summer school, homework club, sports practices and events, as well as journalism, music, drama, and recreational clubs and service clubs. School-sponsored activities before and after the school day and on weekends are also included.

11. Are emergency nursing services required during Summer School?

As noted in question 10 (above), summer school is a school-sponsored activity, and therefore emergency nursing services must be provided to all students in attendance. State and federal laws addressed in questions 1 and 2 (above) apply to summer school. If students receive school nursing or school health services during the school year and need these same services while attending summer school (ex. urinary catheterization or gastrostomy tube feeding), then the nursing or school health services should be provided.

12. Are school districts required to have a school nurse present during Summer School?

In some circumstances, to comply with the Wisconsin Nurse Practice Acts (Wis. Stat. ch. [441](#) and Wis. Admin. Code ch. [N 6](#)), school districts may be required to have a registered nurse or school nurse present during summer school to perform or delegate nursing care. When nursing care is delegated, time for training and supervision of the care, in addition to the evaluation (of the performance and effect of care on the student), must be considered. The provision of standard first aid or medication administration to students does not require registered nurse delegation in Wisconsin. See [Delegation in the School Setting \(2019\)](#) and [Administration of Medications in Wisconsin Schools \(2022\)](#) for a full discussion of these issues.

School districts should seek legal counsel regarding whether districts are required to have a registered nurse or school nurse present to provide or direct emergency or other nursing services during summer school.



Medical Advisors

13. What is the role of the medical advisor?

A medical advisor for the emergency nursing service is required to be a licensed physician ([Wis. Admin. Code § PI 8.01\[2\]\[g\]3](#)). Typically, medical advisors participate in the annual review of the district emergency nursing services program. The roles and responsibilities of medical advisors vary throughout the state and are determined by school districts. In some Wisconsin school districts, the medical advisor serves as a valuable resource in the development of school district policies, protocols, and procedures to address the management of illnesses, injuries, and medication administration in the schools. The medical advisor may also provide standing orders for emergency and over-the-counter medication if district policies allow such medications. Medical advisors may also serve in a consultative role for children with complex medical needs as well as for communicable disease management.

14. How do I find a medical advisor?

School districts often contact local medical clinics and hospitals to solicit candidates. The American Academy of Pediatrics, American Academy of Family Practice, and Wisconsin Medical Society may be helpful in securing a list of physicians in your area. While it is beneficial to have a physician whose practice specialty includes school-age children (pediatrics or family practice), it is not required for the physician to practice such a specialty.

15. What is the liability of a medical advisor?

Medical advisors should check with their professional liability insurance carrier regarding coverage for professional health care services while acting as a medical advisor. It has been reported some insurance carriers make a distinction between coverage for a medical advisor as opposed to medical directors. Medical advisors provide limited medical consultation as a volunteer or as a part-time service contracted by the school district. Medical directors are contracted by agencies to provide ongoing, intensive medical direction and guidance as their primary professional responsibility.

Supplies, Plans, and Support Personnel

16. What information should be included in the pupil emergency information cards?

School districts should have readily accessible pupil emergency information cards ([Wis. Admin. Code § PI 8.01\[2\]\[g\] 5](#)). However, state law does not indicate what specific information needs to be included on the card. The law also does not require that the "emergency information cards" be physical paper cards. Therefore, emergency information may be stored electronically to ensure accessibility.

Pupil emergency information cards provide essential information to those persons who may be called upon to provide emergency care to students. Information generally includes:

- student's name
- address and telephone numbers
- age
- physician's name and telephone number
- hospital preference
- student's parent's, guardian's, or caretaker's names and contact information, including work and cell phone numbers
- custody arrangements
- medical information, including significant illnesses, allergies, medications, and special healthcare needs

Pupil emergency information cards should be filled out by the parent, guardian, or caretaker and updated annually. Pupil emergency information cards are a pupil record and, therefore, subject to pupil confidentiality laws. Information from the pupil emergency card should only be shared with school personnel who have an educational need to know. However, this information should be readily accessible to all school personnel who may need to respond in case of an emergency.

17. What supplies are necessary for emergency nursing services?

State law mandates school districts to have the necessary equipment, space, and supplies available for emergency nursing services ([Wis. Admin. Code § PI 8.01\[2\]\[g\]5](#)). An inexhaustive list of equipment and resources for schools without a school nurse on site might include:

- designated health room
- handicap accessible bathroom
- cot
- first aid reference chart or book
- CPR/AED instructions
- locked cabinet and keys
- emergency resource phone numbers
- biohazard waste bags
- blunt scissors
- clock with second hand
- washable or disposable blankets
- pupil emergency information cards
- cold packs (ice or disposable)
- non-latex gloves
- one-way valve resuscitation mask,
- automated external defibrillator (AED)
- phone
- computer
- refrigerator or cooler
- resealable bags
- soap
- hand sanitizer
- irrigation bottle
- thermometer
- source of oral glucose (frosting or gel packets)
- splints and slings
- sharps container
- tape (regular and bandage)
- bandages, dressings, and ace wraps
- running water

- nose clips for treating bloody noses
- emesis container (bucket or disposable bags)
- disinfectant

Additional equipment, if licensed or trained health care staff is available, might include:

- glucose monitoring device
- medications (such as Albuterol®, epinephrine, and Glucagon®)
- nebulizer
- penlight
- stethoscope
- sphygmometer (blood pressure cuff)
- pulse oximeter
- suction equipment

Additionally, it is recommended to prominently display emergency numbers for services such as:

- emergency medical services (EMS/911)
- poison control
- animal control
- medical providers
- local public health agency
- medical advisor
- dental services
- child protective services

18. How can districts be prepared to provide emergency nursing services to students with known health risks?

The use of an emergency action plan (EAP) is one best practice method to prepare staff to intervene in the event of a health emergency. The goal of an EAP is to provide critical information necessary to help staff and emergency responders act appropriately for the student in a variety of emergency situations. Each student's situation must be examined individually. Registered nurses are qualified to write nursing care plans or Individualized Healthcare Plans (IHP) for students (NASN, 2020). Registered nurses may write EAPs based on their nursing care plan for school staff to follow. Templates are available for writing EAPs.

Critical questions to be considered when developing a student's emergency action plan might include:

- What might happen that would require immediate action?
- What are the precipitating factors that may trigger an event at school?
- What action is required to respond to the emergency?
- What knowledge, skill, and attitude is required of someone to act, or more importantly, to prevent the emergency in the first place?
- Is there a person available with the required ability to act?
- What are the availability, skill level, and response time of community emergency medical services?
- Who has a need to know about the potential situation?
- Who will have the responsibility to act, including "back-up" individuals?

19. Who may provide emergency nursing services in Wisconsin schools?

[Wis. Admin Code §. PI 8.01\(2\)\(g\)](#) does not specify the qualifications or level of training for those providing emergency nursing services to treat pupil accidental injury and illness. [Wis. Stat. § 118.29](#) addresses the training, authorization, and practices surrounding the administration of medication to students. The provision of standard first aid or medication administration to students does not require registered nurse delegation in Wisconsin. See [Delegation in the School Setting \(2019\)](#) and [Administration of Medications in Wisconsin Schools \(2022\)](#) for a full discussion of these issues. Therefore, the qualifications of who may provide or direct emergency nursing services will depend on other state laws such as the Nurse Practice Acts and federal laws and the level of care required or provided to the student. See questions 2 and 3 (above). School districts should seek legal counsel regarding who may provide or direct emergency nursing services.

There are no Wisconsin laws requiring school staff to be trained or certified in first aid, cardiopulmonary resuscitation (CPR), or how to use an automated external defibrillator (AED). It behooves school districts to train school staff to respond appropriately to health emergencies.

20. What are the considerations for a school district that hires an emergency medical technician (EMT) or licensed practical nurse (LPN) to provide emergency nursing services to students?

There are several levels of emergency medical services (EMS) personnel. An EMT or LPN, just like any other state-licensed health care provider, must follow the laws and rules that govern the practice for which they hold a license. An EMT or LPN is treated as a licensed health care professional under [Wis. Stat. § 118.29\(1\)\(c\)](#). The public instruction statutes do not provide immunity to health care professionals who render emergency care to a student ([Wis. Stat. § 118.29\(3\)](#)).

An EMT is licensed to provide pre-hospital first aid under specific guidelines and under the supervision of a physician. If an EMT is employed to provide emergency nursing services in a school, the EMT would be held to the standards of their EMT license, as well as to the standards of care for the tasks in their job description. According to [Wis. Admin. Code § DHS 110.13\(3\)](#), an EMS professional shall follow the patient care protocols or guidelines of the emergency medical service provider with which the EMS professional is serving while performing patient care, regardless of whether the EMS professional is licensed at a practice level higher than that of the provider.

An EMT hired by a school district should determine if they are providing emergency medical care as defined by [Wis. Admin. Code § DHS 110.04\(21\)](#) and be supervised accordingly. Their scope and practice authorize EMTs to administer specific medications and by limited routes (Wisconsin DHS, 2022). EMTs administering medication to students, therefore, are recommended to complete DPI-approved medication administration training and be authorized in writing to administer medications to students under Wis. Stat. § 118.29.

An LPN is licensed to provide "practical nursing" under the specific direction of a nurse, physician, podiatrist, chiropractor, dentist, or optometrist (Wis. Stat. ch. [441.001\(3\)\(a\)](#)). An LPN hired to provide emergency nursing services should be supervised by a registered nurse or other healthcare professional listed in the Nurse Practice Act. Because medication administration is part of LPNs' nursing practice, LPNs may administer medications to students without receiving additional training under [Wis. Stat. §118.29\(6\)\(a\)](#).

A registered nurse may delegate nursing care to licensed practical nurses and less skilled assistants (Wis. Stat. ch. [441.001\(4\)\(d\)](#)), which may include an EMT ([Wis Sec. 256.15\(6p\)](#)).

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