

A. Purpose

1. To provide guidelines for Frederick County Public Schools (FCPS) staff regarding the management and coordination of care for students with diabetes.
2. To establish procedures and articulate responsibilities for the planning, care, and education of students with diabetes.

B. Background

1. In 2016, the Maryland legislature passed House Bill 771, entitled “Public Schools – Administration of Diabetes Care Services – Guidelines,” which codified in Md. Code Ann., Educ. § 7-426.4 the requirement for the Maryland Department of Health (MDH) and the Maryland State Department of Education (MSDE) to develop guidelines for public schools regarding the administration of health care services to students with diabetes, including procedures for monitoring, treating, and administering medication to control diabetes symptoms or in an emergency.
2. Pursuant to Md. Code Ann., Educ. § 7-426.4, instruction of other appropriate school personnel, as determined by the School Nurse, may be necessary to safely implement a student’s medical or educational plan(s), ensuring appropriate school personnel are available to administer insulin during the school day and during other school-sponsored events and activities.

C. Definitions

1. “Acceptable Personal Mobile Device” or “Acceptable PMD” is defined as technology, not provided by FCPS, brought to school or school sponsored activity that includes but is not limited to: cell phones, headphones, smartwatches, speakers, cameras, and/or eReaders. This definition should be read expansively to incorporate new technologies not anticipated by this Regulation that serve a similar function (*i.e.*, to communicate information through a cellular, satellite, or WiFi or other form of network connection).
2. “Blood Glucose” is defined to mean the main source of energy provided by carbohydrate ingestion and is also called “blood sugar.”
3. “Blood Glucose Meter” is defined to mean a small, portable device that measures how much glucose is in the capillary blood using a test strip on which a sample of blood, usually from a finger prick, has been applied, and which displays the blood glucose level.
4. “Blood Glucose Monitoring” is defined to mean the act of checking the amount of glucose in the blood using a continuous glucose monitor (CGM) or a blood glucose meter.

5. “Certified Medical Technician” (CMT) is defined to mean an individual who completes a 20-hour course in medication administration approved by the Maryland Board of Nursing (MBON) and is certified by the MBON.
6. “Certified Nursing Assistant” (CNA) is defined to mean an individual who is certified by the MBON to routinely perform nursing tasks delegated by an RN or LPN.
7. “Continuous Glucose Monitor” (CGM) is defined to mean a device that records interstitial glucose levels at regular intervals continuously throughout the day transmitting the results to an insulin pump or other monitor, triggering an alarm when the blood glucose level is too high or too low.
8. “Delegation” is defined to mean the act of authorizing an unlicensed individual, a CNA, or a CMT to perform acts of registered nursing or licensed practical nursing.
9. “Diabetes” is defined to mean a chronic disease that affects how the body processes carbohydrates, fats, and proteins due to insufficient insulin production or use.
10. “Diabetes Medical Management Plan” (DMMP) is defined to mean the Maryland health care provider order form that contains the instructions and medication orders provided by a student’s health care provider and indicates the health care services and medications needed by a student to treat the student’s diabetes at school.
11. “Emergency Action Plan” (EAP) is defined to mean a document that specifies the actions needed to manage a student’s specific medical condition in the event of a medical emergency.
12. “FCPS-Issued Technology” is defined to mean technology tools provided to students for use to fully access the prescribed instructional program aligned to the educational mission of FCPS.
13. “Health Room Technician” (HRT) is defined to mean an individual who is certified as a CNA and CMT by the MBON and is employed by the Health Services Division (HSD) of the Frederick County Government to provide school health services under the supervision of the School Nurse within a school setting.
14. “Hyperglycemia” is defined as to mean a high blood glucose level that can result from a mismatch of insulin, food intake, stress, illness, and exercise.
15. “Hypoglycemia” is defined as to mean a low blood glucose level that can result from a mismatch of insulin, food intake, and exercise.
16. “Individualized Education Plan” (IEP) is defined to mean a written plan for a student with a disability that is developed, reviewed, and revised in accordance with the Individuals with Disabilities Education Act (IDEA).

17. “Individualized Health Plan” (IHP) is defined to mean a type of nursing care plan developed by the School Nurse utilizing data from a nursing appraisal/assessment, which is specific nursing care for a student with a chronic health condition and designed to meet the student’s unique health care needs.
18. “Insulin” is defined to mean a hormone produced by the pancreas that converts sugar and starches into energy for the body.
19. “Insulin Pump” is defined to mean a device that delivers a continuous supply of rapid acting insulin through an infusion set (plastic tubing) or pod which is attached to the body and is approximately the size of a cell phone.
20. “Licensed Practical Nurse” (LPN) is defined to mean a Licensed Practical Nurse currently licensed by the MBON who is employed by HSD to provide school health services within a school setting.
21. “Nursing Appraisal” is defined to mean the process by which a School Nurse identifies health problems that may interfere with learning, including, but not limited to, health record reviews, health observations, interviews, and conferences with parents, students, educators, and other health professionals.
22. “Nursing Assessment” is defined to mean the act of gathering and identifying data that assists the nurse, the client, and the client’s family to identify the client’s health concerns and needs.
23. “Outside the Health Room Plan,” for the purposes of this Regulation, is defined to mean written plan developed by the school nurse which is specific for a student with a chronic health condition who has been approved to self-carry and/or self-administer their emergency medication.
24. “Parent” is defined to mean a biological or adoptive parent, a court-appointed custodian or guardian, a foster parent, or a caregiver (as defined by the Education Article of the Maryland Annotated Code or as designated by the United States Department of Health and Human Services, Office of Refugee Resettlement).
25. “Remote monitoring,” for the purposes of this Regulation, is defined to mean the use of FCPS-Issued Technology to view a student’s blood glucose levels from a different location from the student’s during the school day.
26. “School health services,” for the purposes of this Regulation, is defined to mean health-related services provided to students by a RN, LPN, HRT, or designated FCPS staff.
27. “School Nurse” is defined as a registered professional nurse (RN) currently licensed by the MBON who is employed by HSD to provide school health services within a school setting.
28. “School-Related Activity” or “School-Sponsored Activity” is defined to mean any school

system activity, on or off school property, in which a student directly participates (*e.g.*, school field trip, athletic event, or class/graduation activity), or an activity in which the student does not directly participate but represents the school or student body simply by being present (*e.g.*, spectator at a school event).

29. “Section 504 Plan” is defined to mean a written document developed for an eligible student in accordance with Section 504 of the Rehabilitation Act of 1973 (Section 504) that allows the student to receive a free and appropriate education in the least restrictive environment.
30. “Special Education” is defined to include instruction provided in accordance with IDEA at no cost to parents, which is specially designed to meet the unique needs of a child with disabilities, including classroom instruction, instruction in physical education, and the provision of educational instruction in homes and hospitals. The term also includes career and technology education, if it consists of specially designed instruction to meet the unique needs of a child with disabilities at no cost to the parents.
31. “Special health care needs” is defined to mean temporary or long-term health problems arising from physical, emotional, or social factors or any combination of these, regardless of whether student is enrolled in a special education program.
32. “Staff,” for the purposes of this Regulation, is defined to mean all FCPS school system and contracted employees.
33. “Teacher-in-Charge” is defined to mean an FCPS employee holding a valid Maryland State Department of Education (MSDE) teaching certificate/license, a Department of Defense certified Navy Junior ROTC (NJROTC) Instructor, and/or a career coach who is approved by the principal to organize a field trip, attends/supervises the field trip, and assumes responsibility for ensuring compliance with provisions of this Regulation as well as the provisions of Board of Education of Frederick County (Board) [Policy 414, Field Trips](#), and [FCPS Regulation 414-01, Field Trips](#).
34. “Unlicensed Individual” is defined as an individual who is not licensed or certified to provide nursing care under Health Occupations Article, Title 8, Annotated Code of Maryland.

D. Procedures

1. General Guidelines

- a. No student shall be excluded from participation in any school program or activity due to diabetes or the need for related health services, consistent with the Americans with Disabilities Act (ADA) and Section 504.
- b. For a student with diabetes to be safely managed in the school setting, a DMMP from a licensed health care provider (HCP) is required.
- c. Implementation of the DMMP to meet the student’s needs should be determined by the School Nurse with input from the parent(s). This does not dictate what is included in a

- student's IEP or Section 504 Plan, which would be determined by a dually constituted team.
- d. The School Nurse has the right and ethical responsibility to communicate with the HCP about any questions or concerns regarding the implementation of a student's DMMP or any other medical orders provided.
 - e. The School Nurse provides care coordination and case management and acts as a liaison between the HCP, the family, the student, and school staff for students with diabetes.
 - f. The School Nurse, as part of the multidisciplinary team, will ensure the health components of the DMMP and IHP are shared with and incorporated into the student's IEP or Section 504 Plan as appropriate to ensure a free appropriate public education (FAPE).

2. Components of Diabetes Management

- a. Blood glucose monitoring, using a blood glucose meter or (CGM), will be required in the school setting as outlined in the student's DMMP.
- b. Blood glucose monitoring in the classroom or other areas of the school is permitted and supported as appropriate based on individual student needs, the nursing assessment, and a student's ability to independently perform diabetes care.
- c. Management of diabetes also includes healthy nutrition to optimize glycemic health. Counting carbohydrates is necessary to balance insulin needs with exercise and food intake. An effective nutrition plan should consider the scheduled school meal/snack times and the student's overall needs, and be developed in collaboration with the student, parent, and HCP.
- d. Regular physical activity is strongly recommended for all children and can significantly improve blood glucose control and insulin sensitivity. For students with diabetes, physical activity can increase the risk of hypoglycemia when not properly managed. Blood glucose levels should be assessed prior to physical activity in accordance with the student's DMMP.
- e. Insulin delivery is critically important to maintain blood glucose control for students with Type 1 Diabetes. The route, dose, and time(s) of insulin delivery will be indicated in the student's DMMP.
- f. Hypoglycemia occurs when the blood glucose level is below the student's target range and should be treated quickly with fast-acting carbohydrates according to the student's DMMP.
- g. Hyperglycemia occurs when the blood glucose is above the individual's target range. Treatment for hyperglycemia frequently requires fluid intake and administration of insulin and is guided by the student's DMMP.

3. Individualized Health Care Plans

- a. The School Nurse will complete a nursing appraisal and assessment for any student diagnosed with diabetes.
- b. Based on the results of the nursing assessment, the School Nurse will determine the need to develop an IHP.
- c. The IHP is used to document the nursing process in the school setting and should

- facilitate the management of the student's diabetes and provide a written record outlining the student-specific nursing care and interventions required by the student.
- d. The IHP includes, but is not limited to, planning for emergency situations, school bus transportation, field trips, and school-sponsored extra-curricular activities.
 - e. Information from the IHP will be shared with appropriate school staff as needed to safely support the student during the school day, including transportation, field trips, and school-sponsored extracurricular activities.
 - f. The School Nurse will ensure a copy of the IHP is included in the student's health file and will provide a copy to the student's parent(s) and HCP as appropriate.
 - g. The IHP shall be reviewed at least annually and updated as necessary to reflect changes in the student's condition or DMMP.

4. Emergency Action Plans

- a. Based on the results of the nursing assessment and the DMMP, the School Nurse will develop an EAP for any student diagnosed with diabetes. The EAP is included in the student's IHP.
- b. The EAP should include, but is not limited to:
 - i. Signs and symptoms of hypoglycemia and hyperglycemia requiring intervention;
 - ii. A plan for school staff to contact school health services staff in response to CGM alarms or any indication of an emergency; and
 - iii. A plan for an adult to accompany a student to the health room when necessary.
- c. The School Nurse will provide a copy of the EAP to appropriate school staff who have direct contact with the student, provide a copy to the parent(s), and place a copy in the student's health file.
- d. The School Nurse should provide diabetes management and/or EAP training to appropriate school staff who have responsibility for a student with diabetes during the school day, on field trips, or at school-sponsored activities.
- e. The School Nurse should document the date and time of training and include the name, and position of each staff member who receives training on a student's EAP and/or DMMP. Documentation of the training shall be maintained in the student's health file.
- f. The EAP shall be reviewed at least annually and updated as necessary to reflect changes in the student's condition or DMMP.

5. Insulin Pumps

- a. The route(s) of insulin administration will be indicated in the student's DMMP when needed to manage the student's diabetes.
- b. Students who use an insulin pump for insulin administration will also need to have backup supplies for insulin administration in case of pump failure.
- c. If the insulin pump fails or becomes dislodged and the student can independently replace it with available supplies, they should be allowed to do so to resume pump use.
- d. School health services staff are not expected or required to perform insulin pump replacement or site changes if the insulin pump fails or becomes dislodged. If the insulin pump fails or becomes dislodged, and the student is not able to replace it, insulin will be administered as indicated in the DMMP, and school health services staff will place the pump in a plastic bag to be sent home with the student.

6. Continuous Glucose Monitors

- a. A CGM functions by using a sensor inserted under the skin to regularly measure glucose levels in the interstitial fluid. The readings are transmitted via Bluetooth to a monitoring device such as an insulin pump, smartphone, smart watch, or receiver worn or carried by the student.
- b. The student's DMMP will specify whether the student uses a CGM for blood glucose monitoring.
- c. If the student uses a CGM for their blood glucose monitoring, the School Nurse and/or trained school staff will use the CGM as outlined in the student's DMMP.
- d. Students who use a CGM for their blood glucose monitoring will also need to have a blood glucose meter and necessary supplies in the school health room in the event of CGM failure or dislodgement of the sensor during the school day.
- e. If a CGM site fails during the school day and the student can independently replace it with available supplies, they should be allowed to do so to resume CGM use.
- f. School health services staff are not expected or required to change CGM sites or replace the sensor when the CGM fails or becomes dislodged during the school day. If the CGM fails or becomes dislodged during the school day and the student is not able to replace it, blood glucose monitoring will be performed utilizing the student's blood glucose meter as outlined in the student's DMMP and school health services staff will place the sensor in a plastic bag to be sent home with the student.
- g. Parents are responsible for providing the acceptable PMD used for CGM monitoring as well as the blood glucose meter and all associated supplies for blood glucose monitoring.
- h. The FCPS Department of Technology Infrastructure (DTI) will attempt to configure the school's network to enable the student's acceptable PMD to connect to the school's Wi-Fi, to the extent possible.
- i. Most CGMs also transmit data remotely, allowing multiple devices to simultaneously display real-time data. Parents who are remotely monitoring their child's CGM are expected to collaborate with the school nurse to develop a clear communication plan.
- j. When remote monitoring is necessary, it will be limited to monitoring for alarms requiring action and at specific times as outlined in the DMMP, consistent with the child's IEP or Section 504 Plan, if any.
- k. School health services staff will make every reasonable effort to ensure that the remote monitoring device is secured and displayed to ensure the privacy of the individual being monitored.
- l. As CGMs are considered acceptable PMDs, student use of CGMs must adhere to the permissible and prohibited uses of acceptable PMDs as outlined in [FCPS Regulation 434-01, Technology Use, Students](#).

7. Section 504 and Individual Education Program (IEP) Accommodations

- a. Students with diabetes may require additional accommodations under Section 504 and should be individually assessed for their eligibility for services.
- b. If a student with diabetes qualifies for special education services, an IEP may also include specific accommodations.
- c. If a student with diabetes is eligible for a Section 504 Plan and/or IEP, the School Nurse will participate as a member of the Section 504 and/or IEP team.

8. Delegation of Nursing Services

- a. To improve the care coordination of students who require nursing services, the School Nurse may consider delegation to support the implementation of the student's DMMP and/or IHP/EAP.
- b. Delegation of nursing tasks to an HRT or unlicensed individual is made using the criteria for delegation under Maryland law and regulation, using the School Nurse's professional judgement.
- c. The School Nurse may delegate the responsibility to perform a nursing task to an unlicensed individual only if the nursing task does not become a routine part of the unlicensed individual's job duties.

9. School-Sponsored Extracurricular Activities

- a. Parents/Students are responsible for notifying school health services staff at least ten (10) days in advance of the student's planned participation in school-sponsored extracurricular activities.
- b. The school principal will collaborate with the School Nurse to identify appropriate staff to be trained on the student's EAP prior to the student's participation in school-sponsored extracurricular activities.
- c. The School Nurse will provide training regarding the student's EAP, DMMP, and the nursing assessment to the identified staff and will provide copies of the student's EAP and DMMP to the trained staff.

10. Field Trips

- a. The Teacher-in-Charge is responsible for notifying school health services staff and the school principal at least ten (10) days in advance of a planned field trip as described in [FCPS Regulation 414-01, Field Trips](#).
- b. The school principal will collaborate with the School Nurse to identify appropriate staff to be trained on the student's EAP prior to field trips the student will be attending.
- c. The School Nurse will provide training regarding the student's EAP, DMMP, and the nursing assessment to the school health services staff or designated FCPS staff and will ensure the appropriate training and supplies are available, if provided by the parents, consistent with the IHP/EAP and DMMP.
- d. Parents are responsible for providing the appropriate medications and supplies required for field trips to school health services staff.

11. Parent Responsibilities

- a. Parents are responsible for informing the School Nurse or other school health services staff that their child has been diagnosed with diabetes and with providing the School Nurse with complete, accurate, and up-to-date medical information regarding their child's diabetes diagnosis.
- b. Parents are responsible for providing a current DMMP from their child's HCP prior to the start of each school year and for informing school health services staff of any changes to the DMMP.
- c. Parents are responsible for providing non-expired routine and emergency medications, equipment, and snacks, beverages, and supplies as needed through the school year, and

- for ensuring a sufficient supply of medications, equipment, snacks, and supplies are provided for long-term care of up to 72 hours in the case of a disaster or emergency.
- d. Parents are responsible for providing the acceptable PMD used for CGM monitoring as well as the blood glucose meter and all associated supplies for blood glucose monitoring.
 - e. Parents must notify the School Nurse at least ten (10) days prior to their child's participation in school-sponsored activities and extra-curricular activities to allow for appropriate planning and training of staff to support the student's diabetes management while participating.
 - f. When indicated in the DMMP, parents have the authority to recommend changes to insulin dose, carbohydrate ratio, and/or correction factor within the HCP's written parameters. The parent is responsible for communicating such changes in writing to the School Nurse.
 - g. Changes outside the parameters of the DMMP should be communicated to the school nurse directly by the HCP as School Nurses are required to manage diabetes per the HCP's orders in the DMMP at all times.

12. Student Responsibilities

- a. Students are responsible for participating in their diabetes management or participating in learning self-management skills as developmentally appropriate.
- b. Students are responsible for treating and/or reporting their symptoms of hypoglycemia or hyperglycemia to school health services staff or other designated trained school staff as specified in the student's DMMP and as developmentally appropriate.
- c. Students are expected to use standard precautions and dispose of sharps appropriately when handling needles, lancets, or other sharps as instructed by the School Nurse.
- d. Students are expected to comply with [FCPS Regulation 434-01, Technology Use-Students](#), and the [Student Code of Conduct](#) when using their acceptable PMD for diabetes management.
- e. Students who self-manage their diabetes are expected to:
 - i. Demonstrate to the School Nurse their capability to self-administer medication, self-treat hypoglycemia and hyperglycemia symptoms, and to safely use blood glucose monitoring equipment and supplies in accordance with the student's DMMP.
 - ii. Notify the School Nurse at least ten (10) days prior to their participation in school-sponsored activities and extracurricular activities to allow for appropriate planning and training of staff to support the student's diabetes management while participating.
 - iii. Communicate any changes to insulin dose, carbohydrate ratio, and/or correction factor to the School Nurse.
 - iv. Follow the Outside the Health Room Plan (OHRP).
 - v. Act responsibly when possessing and self-administering medications.

13. School-Based Staff Responsibilities

- a. The school principal or designee is responsible for collaborating with the School Nurse to identify appropriate school staff to be trained in diabetic care and/or response in

- diabetic emergencies, including administration of emergency medications when necessary to support students with diabetes in their school.
- b. School staff who have responsibility for a student with diabetes during the school day and/or school-sponsored activities and extracurricular activities are responsible to attend training on the student's EAP and to follow the EAP in response to the student's symptoms of hypoglycemia, hyperglycemia, CGM alarms, or other symptoms of a diabetic emergency as indicated.
 - c. When preparing a substitute plan, teachers are expected to reference any students requiring diabetes management support and to direct the substitute to the school health services staff with any questions.

- 14. Legal Protections.** In accordance with Maryland law, an individual who has received instruction to provide diabetes care services to students is not civilly liable for any act or omission in the course of providing diabetes care services to a student if:
- a. The individual is acting in good faith while providing diabetes care services to a student who is in need of diabetes care services or to a student who the individual believes in good faith to be in need of diabetes care services;
 - b. The diabetes care services are provided in a reasonably prudent manner; and
 - c. The diabetes care services are provided to the student without fee or other compensation.

E. Related Information

1. Board Policy

- a. [Policy 118, *Personal Mobile Devices*](https://apps.fcps.org/legal/documents/118)
(<https://apps.fcps.org/legal/documents/118>)
- b. [Policy 409, *Student Health and Wellness*](https://apps.fcps.org/legal/documents/409)
(<https://apps.fcps.org/legal/documents/409>)
- c. [Policy 414, *Field Trips*](https://apps.fcps.org/legal/documents/414)
(<https://apps.fcps.org/legal/documents/414>)

2. Board Resources

- a. Memorandum of Agreement between Frederick County Public Schools and Frederick County Government, Dec. 10, 2024

3. Code of Maryland Regulations (COMAR)

- a. [COMAR 10.27.09.03, *Standards of Professional Performance*](https://fcps-md.info/COMAR_10-27-09-03)
(https://fcps-md.info/COMAR_10-27-09-03)
- b. [COMAR 10.27.11, *Delegation of Nursing Functions*](https://fcps-md.info/COMAR_10-27-11)
(https://fcps-md.info/COMAR_10-27-11)
- c. [COMAR 13A.05.05.08, *School Health Services Standards — For All Students with Special Health Needs*](https://fcps-md.info/COMAR_13A-05-05-08)
(https://fcps-md.info/COMAR_13A-05-05-08)
- d. [COMAR 13A.08.02, *Student Records*](https://fcps-md.info/COMAR_13A-08-02)
(https://fcps-md.info/COMAR_13A-08-02)

4. External Resources

- a. [American Diabetes Association, *Guidance for the Use of Continuous Glucose Monitoring in the School Setting* \(June 10, 2025\)](https://fcps-md.info/ADA_CGM_Guidance)
(https://fcps-md.info/ADA_CGM_Guidance)
- b. [Md. State Dep't of Educ., *Maryland State School Health Services Guideline: Management of Diabetes in Schools* \(May 2017, revised Sept. 2020\)](https://fcps-md.info/MSDE_Diabetes_Management)
(https://fcps-md.info/MSDE_Diabetes_Management)
- c. [Md. State Dep't of Educ., *Delegation of Nursing Functions in a School Setting: Maryland State School Health Services Guidelines* \(December 2023\)](https://fcps-md.info/MSDE_Nursing_Delegation)
(https://fcps-md.info/MSDE_Nursing_Delegation)
- d. [Md. Dep't of Health, *Diabetes Action Plan* \(June 2020\)](https://fcps-md.info/MDH_Diabetes_Action_Plan)
(https://fcps-md.info/MDH_Diabetes_Action_Plan)

5. FCPS Regulations

- a. [Regulation 400-66, *Section 504 of the Rehabilitation Act of 1973*](https://apps.fcps.org/legal/documents/400-66)
(<https://apps.fcps.org/legal/documents/400-66>)
- b. [Regulation 409-10, *Medication Administration and Administration of Medical Cannabis to Students* \(formerly 400-23\)](https://apps.fcps.org/legal/documents/400-23)
(<https://apps.fcps.org/legal/documents/400-23>)
- c. [Regulation 414-01, *Field Trips* \(formerly 400-05\)](https://apps.fcps.org/legal/documents/414-01)
(<https://apps.fcps.org/legal/documents/414-01>)
- d. [Regulation 434-01, *Technology Use, Students*](https://apps.fcps.org/legal/documents/434-01)
(<https://apps.fcps.org/legal/documents/434-01>)

6. FCPS Resources

- a. [FCPS / Academics / Curriculum: Health & PE / Health Resources](https://www.fcps.org/academics/curriculum_health_pe/health_resources)
(https://www.fcps.org/academics/curriculum_health_pe/health_resources)
- b. [FCPS / Families & Students / Office of Student Services / Health Services](https://www.fcps.org/families_students/student_services/health_services)
(https://www.fcps.org/families_students/student_services/health_services)
- c. [FCPS / Families & Students / Student Code of Conduct](https://www.fcps.org/families_students/student_code_of_conduct)
(https://www.fcps.org/families_students/student_code_of_conduct)
- d. [FCPS Academic Curriculum Health Resources](https://www.fcps.org/academics/curriculum_health_pe/health_resources)
- e. **Forms**
 - i. [Authorization to Release Information Form](https://apps.fcps.org/forms/parents-students-mental-health-services/145)
(<https://apps.fcps.org/forms/parents-students-mental-health-services/145>)
 - ii. [Diabetes Medical Management Plan Form](https://apps.fcps.org/forms/parents-students-health/113)
(<https://apps.fcps.org/forms/parents-students-health/113>)
 - iii. [Electronic Device Usage Agreement](https://apps.fcps.org/forms/parents-students-technology/305)
(<https://apps.fcps.org/forms/parents-students-technology/305>)
 - iv. [Medication Administration Form](https://apps.fcps.org/forms/parents-students-health/114)
(<https://apps.fcps.org/forms/parents-students-health/114>)

7. Federal Law

- a. Americans with Disabilities Act (ADA)
- b. Clinical Laboratories Improvement Act (CLIA)
- c. Family Educational Rights and Privacy Act (FERPA)

- d. Health Insurance Portability and Accountability Act (HIPAA)
- e. Individuals with Disabilities Education Act (IDEA)
- f. Section 504 of the Rehabilitation Act of 1973 (Section 504)

8. Maryland Law

- a. Maryland Nurse Practice Act

9. Maryland Statutes

- a. [Md. Code Ann., Educ. § 7-426](https://fcps-md.info/MD_Educ_Code_7-426)
(https://fcps-md.info/MD_Educ_Code_7-426)
- b. [Md. Code Ann., Educ. § 7-426.4](https://fcps-md.info/MD_Educ_Code_7-426.4)
(https://fcps-md.info/MD_Educ_Code_7-426-4)
- c. [Md. Code Ann., Health Occup. § 8-102](https://fcps-md.info/MD_Health_Occup_Code_8-102)
(https://fcps-md.info/MD_Health_Occup_Code_8-102)
- d. [Md. Code Ann., Health Occup. § 8-205](https://fcps-md.info/MD_Health_Occup_Code_8-205)
(https://fcps-md.info/MD_Health_Occup_Code_8-205)
- e. [Md. Code Ann., Health Occup. § 8-6A-01](https://fcps-md.info/MD_Health_Occup_Code_8-6A-01)
(https://fcps-md.info/MD_Health_Occup_Code_8-6A-01)
- f. [Md. Code Ann., Health Occup. § 8-6A-03](https://fcps-md.info/MD_Health_Occup_Code_8-6A-03)
(https://fcps-md.info/MD_Health_Occup_Code_8-6A-03)
- g. [Md. Code Ann., Health Occup. § 8-6A-05\(a\)\(4\)](https://fcps-md.info/MD_Health_Occup_Code_8-6A-05)
(https://fcps-md.info/MD_Health_Occup_Code_8-6A-05)
- h. [Md. Code Ann., Health Occup. § 8-6A-08\(f\)\(5\)](https://fcps-md.info/MD_Health_Occup_Code_8-6A-08)
(https://fcps-md.info/MD_Health_Occup_Code_8-6A-08)

F. Regulation History (Maintained by Legal Services)

<i>Responsible Office</i>	Department of Special Education and Student Services
Adoption Dates	01/12/05
Review Dates	
Revision Dates	10/26/17; 12/05/25