



Administration of Medication

Field Trip

Medical treatment is the responsibility of the parent(s) and family physician. Medications, both prescription and over the counter, are rarely given at school: the only exceptions involve special or serious problems where it is deemed absolutely necessary by the physician that the medication be given during school hours. The parent is urged, with the help of your child's physician, to work out a schedule of giving medication at home, outside school hours whenever possible.

Serving High School policy allows personnel to assist students who are required to take medication during the school day in carrying out a physician's recommendation. This service is provided to enable the student to remain in school, to maintain, or improve his/her potential for education and learning. Designated non-medical school personnel may be administering your child's medication. Medication will be safely stored and locked or refrigerated if required.

Students may carry emergency medicine such as EpiPen or inhalers (only if authorized by physician, parent, and school nurse). A second EpiPen or inhaler must be kept at school for emergency use. We recommend that any student who has a serious medical condition (diabetes, epilepsy, etc.) should have an emergency supply of their prescription medication at school with the appropriate consent forms in case of disaster.

If medication is to be administered at school or on a field trip, all of the following conditions must be met:

1. A written statement signed by the physician specifying the condition for which the medication is to be given, the name, dosage, time, route, and specific instructions for emergency treatment must be on file at school.
2. A signed request from the parent/guardian must be on file at school.
3. Medication must be delivered to the school by the parent/guardian or other responsible adult.
4. Medication must be in your child's original, labeled pharmacy container.
5. All liquid medication must be accompanied by an appropriate measuring device.
6. A separate form is required for each medication.

Note: Please discuss your physician's instructions with your child, so that he is aware of the time medication is due at school.

This request is valid for a maximum of one year. Whenever there is a change in medication, dose, time, or route, the parent(s) and physician must complete a new form.

PARENT REQUEST TO ADMINISTER PRESCRIPTION & NON-PRESCRIPTION MEDICATION

I request that medication be administered to my child, _____ in accordance with our physician's written instructions. I understand that non-medical school personnel may administer medication under the request of your physician. I will notify the school immediately and submit a new form if there are changes in medication, dosage, time of administration, and/or the prescribing physician and give permission to contact the physician when necessary. Medication must be in the student's original, labeled pharmacy container. You may request two containers, one for school and one for home.

Student Name: _____ Cell Phone: _____
Parent/Guardian Signature: _____ Work Phone: _____
Date: _____ Home Phone: _____

PHYSICIAN REQUEST FOR ADMINISTRATION OF MEDICATION

Reason for Medication: _____
Medication: _____ Dose: _____ Route: _____ Time: _____
Possible reactions (i.e. allergic): _____
Instructions Emergency Care: _____

DISPOSITION OF STUDENT FOLLOWING ADMINISTRATION OF MEDICATION

(circle one) Rest 15 minutes Home Doctor's Office Hospital
Physician's Signature: _____ Date of Request: _____
Physician Address: _____ Date to Discontinue: _____
Physician Office #: _____

SCHOOL USE

Designated Personnel: _____ Date Received: _____
Administrator: _____ Date: _____