Request for Administration of Medicine

NOTICE TO PARENTS: The parent/legal guardian must bring medication to school in a container that is appropriately labeled by the pharmacy or physician.

Today's Date/	
Name of Student	
Student's Date of Birth/	
Student's Diagnosis	
Medication	Dosage
Time of Administration	
Route of Administration and Instructions	
Start Date / / End Date /	/
Physician's name (please print)	
Physician's Signature	
Physician's Phone Number	
PARENT/LEGAL GUARDIAN: I hereby give permission for the school to administer the medication as prescribed above. I also give permission for the school to contact the above health care provider regarding the administration of this medication.	
Signature – Parent/Legal Guardian	Date/
Home phone Number	Cell Phone Number
Work Phone Number	_

GUIDELINES FOR PRESCRIBING MEDICATIONS TO BE ADMINISTERED TO STUDENTS DURING THE SCHOOL DAY

We welcome your support in providing services to our students. When prescribing medications for school age children, kindly consider the following requests and policies:

- 1. Whenever possible, avoid prescribing medication for administration during school hours, especially medications to be administered for a short period of time.
- 2. Schools are required to have appropriately labeled pharmacy/physician containers. These will be kept under lock and key in the school clinics.
- 3. Carrying of inhalers on the person is discouraged, unless ordered by a physician, because such items are easily stolen, lost, or forgotten at home, leaving the student in a dilemma and possibly in a medical crisis.
- 4. Any change of prescriptions requires a new written order from the prescribing physician.
- 5. Schools are readily available by FAX for quick communication.
- 6. Students are not allowed to transport medication on their person to and from school

Thank you for helping us provide the best possible services for students taking medications.