

## Medication Authorization for Overnight Field Trips

The administration of medication to students on field trips shall be done only when the student has a medical condition that may be adversely affected without medication. This applies to both prescription and non-prescription medication. The school nurse does not usually accompany students on field trips. The student's teacher or principal designated staff member will be responsible for storing and administering medication on the field trip. Exceptions are made with **parent/school nurse consent** for students with inhalers, Epi-Pens, Insulin, or other medication deemed necessary for Life-Threatening conditions to self-carry and administer.

- **Any prescription or nonprescription medication sent on the field trip must include:**
  1. **Original labeled container**
  2. **An order from the physician**
  3. **Written parent permission**
  
- **Parent/Guardian is responsible for bringing and giving the medication to the school nurse or teacher prior to departure. *Send only the amount needed for the field trip.* If school already has permission to give medication and the times to give are the same, then a new signed form from the physician is not necessary! Please contact the School Nurse 5 days in advance to make arrangements for meds from school to be sent on the trip.**
  
- **The following must be completed in order for medication to be administered on an overnight field trip:**

Name of Student \_\_\_\_\_

Name of Medication \_\_\_\_\_ Dosage \_\_\_\_\_ Time to be given \_\_\_\_\_

Name of Medication \_\_\_\_\_ Dosage \_\_\_\_\_ Time to be given \_\_\_\_\_

Name of Medication \_\_\_\_\_ Dosage \_\_\_\_\_ Time to be given \_\_\_\_\_

Able to self-carry Emergency Medication (Inhaler, Epi-Pen, Insulin) Yes or No

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Physician Signature**

\_\_\_\_\_  
**Date**

**Parents who plan to accompany their child on the Field Trip should complete this form and return it to school, as requested, but do not need a physician signature for medications they plan to administer themselves.**

\_\_\_\_\_ **Initial here if you plan to accompany your child and be responsible for your child's medical needs on this Field Trip.**