

**AUTHORIZATION FOR MEDICAL PROCEDURES AT SCHOOL**



\*\*\*MUST BE SIGNED BY LEGAL GUARDIAN AND PHYSICIAN\*\*\*

STUDENT'S NAME: \_\_\_\_\_

BIRTHDATE: \_\_\_\_\_

LEGAL GUARDIAN: \_\_\_\_\_

DAYTIME PHONE: \_\_\_\_\_

PHYSICIAN TREATING STUDENT FOR THIS CONDITION: \_\_\_\_\_

PHYSICIAN CONTACT NUMBER: \_\_\_\_\_

PROCEDURE: \_\_\_\_\_

STUDENT'S PRIMARY DIAGNOSIS THAT REQUIRES THIS PROCEDURE: \_\_\_\_\_

SPECIFIC INSTRUCTIONS FROM THE PHYSICIAN FOR THIS PROCEDURE (**LIST ANY PRECAUTIONS OR SIDE EFFECTS AS WELL**): \_\_\_\_\_

TIME SCHEDULE AND /OR INDICATIONS FOR THIS PROCEDURE: \_\_\_\_\_

THIS PROCEDURE SHOULD BE DONE BY:

NURSE \_\_\_\_\_ NURSE AND STUDENT \_\_\_\_\_ STUDENT ALONE \_\_\_\_\_

DATE TO **START** PROCEDURE \_\_\_\_\_ DATE TO **STOP** PROCEDURE \_\_\_\_\_

I understand that I must provide all equipment and supplies in order for my child to complete this procedure at school. I also understand that I must notify the school immediately if the health status of my child changes, if we change, physicians, or if the procedures are changed or cancelled. I understand that whenever possible this procedure will be provided at home before or after school hours. I hereby give my permission for the exchange of confidential information between the above-named physician and the school.

LEGAL GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PHYSICIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**SELF-ADMINISTER /SELF MONITOR MEDICAL PROCEDURE**

My child **must be allowed to self-administer and self- monitor** this procedure without guidance while at school. The physician and parent have determined this will provide the best medical treatment for this child. He/she has been trained by the physician and has demonstrated competence in this procedure.

PHYSICIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

LEGAL GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**\*\*\*BOTH AREAS MUST BE SIGNED BY THE PHYSICIAN AND PARENT/GAURDIAN IF THE STUDENT IS TO SELF ADMINISTER/SELF MONITOR THIS PROCEDURE DURING SCHOOL HOURS.\*\*\***