FILE: JHCD-AF3
Critical

ADMINISTRATION OF MEDICATION TO STUDENTS

(Permission Form for Medications)

Note: Parent or Guardian MUST complete the entire form. NO over-the-counter or prescription medication will be dispensed unless provided in its original container. District practice allows administration of five doses of over-the-counter medication on a parent signature. Over five doses will require a physician's order/signature. All medication should be administered at home during non-school times if possible. The district will not knowingly administer the first dose of any medication.

School: _____ Date Form Received by the School: _____

Student: _____ DOB: _____ Age: _____ Grade: _____

Name of Medication: _____ Rx ☐ OTC ☐

Reason for Medication: _____

Form of medication: Tablet/Capsule☐ Liquid ☐ Inhaler☐ Nebulizer☐ Injection☐ Other: _____

Instructions: (Schedule/Times and Dose to be given at school): _____

_____

Anticipated Side Effects: _____

_____

PHYSICIAN'S SIGNATURE: _____ Date: _____

Physician Name: _____ Phone: _____

Office Address: _____ Fax: _____

++

PARENT PERMISSION FOR ADMINISTRATION OF ABOVE MEDICATION

I give permission for the administration of this medication at school. I give the district permission to contact the student's physician to provide information or to clarify administration instructions. I am responsible for providing the medication to the school and informing the school immediately of any changes. I release school personnel from liability should reactions result from giving this medication. In the event of an emergency I realize the student will be transported to the nearest appropriate health facility.

PARENT SIGNATURE: _____ Date: _____

Cell: _____ Work: _____ Home: _____

Notice: Stock pre-filled epinephrine auto syringes are located in each building and can be administered when available by the school nurse or other trained personnel in the event of a life-threatening anaphylactic emergency.

Implemented: 07/09/2003 Revised 3/21/2006; 12/12/2006; 4/16/2013; 12/10/2019 Brentwood School District, Brentwood, MO