

Conewago Valley School District  
**Medication Permission Form and Individualized Health Care Plan**  
**\*\*Physician's Orders ONLY (Physician Signature Required)\*\***

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Health Concern/Diagnosis: \_\_\_\_\_

Allergies: \_\_\_\_\_

List ALL of Current Medications (taken at home and school):

\_\_\_\_\_

**\*\*Medication to be Taken at School (if any)**

Name of Medication	Route	Dosage	Time	Possible Side Effects

<b><i>Asthma Action Plan:</i></b>	<b><i>Diabetic Orders:</i></b>
<p><b>Conditions that Trigger Asthma Symptoms:</b></p> <p>_____</p> <p>_____</p> <p>_____</p> <p><b>Steps to Follow for an Acute Asthma Episode:</b></p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>4. _____</p> <p>5. _____</p> <p>6. _____</p> <p>7. Use inhaler when peak flow is _____ *</p> <p><b>Personal Best Peak Flow Reading:</b> _____ *</p> <p><small>(Please Note: A peak flow meter must be brought from home if it is preferred to be measured during school hours)</small></p> <p><b><i>Student may carry and use his/her own inhaler and knows how to use it. (Please circle) YES NO</i></b></p>	<p><b>Target Blood Glucose Range:</b></p> <p style="text-align: right;">From _____ To _____</p> <p><b>Test Ketones When Blood Glucose Is Above:</b> _____</p> <p><b>Delay Gym Class When Blood Glucose Is:</b></p> <p style="text-align: right;">Above _____ or Below _____</p> <p><b>Call Physician When Blood Glucose Is:</b></p> <p style="text-align: right;">Above _____ or Below _____</p> <p><b>Insulin Orders and/or Insulin Pump Settings:</b>  <i>(Include Insulin type, time and dosage)</i></p> <p>_____</p> <p>_____</p> <p>_____</p> <p><b>Sliding Scale Insulin Coverage and Times:</b>  <i>(During school hours)</i></p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>

**Additional Instructions:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Physician's Signature (required) **X** \_\_\_\_\_

Physician's Address \_\_\_\_\_

Physician's Phone Number \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian's Signature (required) **X** \_\_\_\_\_