## ALBERT LEA AREA SCHOOLS MEDICATION PHYSICIAN ORDER AND PARENT AUTHORIZATION FORM

NAM	MELast First		_BIRTHDATE	*		
	Last First	Middle				
SCI	HOOL		GRADE			
				•		
PHYSICIAN'S ORDER:  I hereby request and authorize you to give the following:						
	Medication I	Oosage	Tim	e	Duration	
1.						
1					·	
					-	
3.						
Diagnosis/medical reason for medication:						
ICD 10 Code for Medical Diagnosis:						
Other Medications this student is taking:						
Other Recommendations/UNUSUAL side effects:						
Phy	ysician's Signature:			Date:		
	nted Physician Name:		•			
1			Fax#			
	DADENI	TOUADE	NAN AUTUODIZ	ATIONÍ	•	
	PARENI	I/GUARL	DIAN AUTHORIZ	ATION:	•	
1.	I request that the above medication be giv					
2. 3.						
4	in the physician's order).  4. I give permission for the school nurse to have communication with teachers about the action and side effects of this					
	medication.					
5.	5. I give permission for the school nurse to consult with the above-named student's physician regarding any questions that arise with regard to the listed medication or medical condition being treated by this medication.					
6.	Field Trips- I give permission for the assi necessary, following school procedure.	gned teacher/	esponsible adult to admin	ister the medicati	on on a field trip, as	
Sig	gnature of parent/guardian:			oate:		
Re	elationship to student:		· Dav	time Phone #:		

## Abbreviated School Medication Policy for Albert Lea Area Schools

- Students requiring medication at school shall be identified by parents to school nurse, health coordinator, secretary, principal or teacher.
- The medication and Physician Order and Parent Authorization Form must be completed by the parent and before the medication is given in the school. All medication requires these forms.
- It is preferred that medication be given outside of school hours if possible. If not possible, parents and students are responsible to informing the school nurse of any change in the medication. Dosages must be in writing from a physician. When circumstances warrant, the physician may provide verbal medication orders or changes in medication dosages to the school nurse only. Verbal orders must be followed by written authorization.
- For the parent and child's protection, the medication will be brought to the school office by an adult. (if not possible- please contact the school nurse, secretary or clerk)
- All prescription's must be brought to school in a prescription bottle as issued by a pharmacist. The label must match the doctors order. Over the counter medication must be brought in the original, sealed container with the child's name written on it. If the medication needs to be cut in half, parent should cut in half before bringing to school. Some medications are considered controlled substances. Parents may be asked to bring one month at a time to school, since the bottle of medication needs to be counted after each dose is given.
- All written medication authorizations are effective for the *current year* only.
- Medications will be kept in a locked cabinet. Any exceptions to this must be cleared with the school nurse.
- Bronchial inhalers can be carried by the student upon doctors written order, parent permission, health office and teacher notification.
- Requests for self-administration will be dealt with on an individual basis. Approval will be determined by the school nurse. These students must have the Medication Request and Authorization form filled out and on file in the Health Office.
  - Students without prior approval, observed by school personnel self-administering medications, will be reported to the principal.
  - Any medication given by school personnel other than oral or inhalers, must be dealt with on a one to one basis with the school nurse, parents, physician and school personnel. The school district retains the discretion to reject requests for administration of medication by school district staff.
  - Field trips- planning for students with conditions that require medication on field trips will be done on an individual basis prior to the day of the field trip with the help of the parent.
     It is the teachers and the parent's responsibility to inform the nursing office in advance of a field trip. The teacher or another staff member can carry and administer the medication on the field trip as necessary, following school procedure.

To see full policy, go to Albert Lea Area Schools website under Health Services and Medications