



# WAYNE COUNTY SCHOOL DISTRICT



## Over-the-Counter Medication Parental/Physician Consent Form

Dear Physician/Parent/Guardian,

The faculty/staff of the Wayne County School District do not render medical care except for First Aid. The Wayne County Schools will not supply students with any form of over-the-counter medication. According to the Wayne County School District policy on Student Medication, all medications that are dispensed to students during school hours must be housed in the office. Over-the-counter medication should be accompanied by a completed Physician Order/Parental Consent Form. A physician's prescription or consent is required for the school nurse to administer any medication. However, parents may come to the school to administer medication to their child. Medication will not be administered per telephone notification.

The school must be provided the following information for an over-the-counter medication to be dispensed:

Student's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 School \_\_\_\_\_ Teacher/Grade: \_\_\_\_\_  
 Type of Illness or Injury \_\_\_\_\_  
 Name of Medication \_\_\_\_\_  
 Dosage \_\_\_\_\_ Route \_\_\_\_\_ Time(s) to be Administered \_\_\_\_\_

\*NOTE School designee will provide assistance for the child with self-administration of the above medication. If the medication is to be administered more than once during the day, please list all times to be administered.

I, \_\_\_\_\_, authorize the school principal, or his/her  
**Parent/Guardian Signature**  
 designee, to dispense the above over-the-counter medication to \_\_\_\_\_,  
**Name of Student**  
 my child, according to the above stated instructions.

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

\_\_\_\_\_  
**Clinic/Office Address** \_\_\_\_\_  
**Phone**