



### Request for Administration of Medication by School Personnel

In order for JISD personnel to administer parent-provided medication to a student, the following are **required**:

- Completed medication form with **physician's signature** for both **prescription and over the counter medications**.
- Signature of parent/guardian on medication form.
- Prescribed medication in the pharmacy container with a current prescription label. Over the counter medications in the original unopened container.

Student Information:		
Name	Date of Birth	Grade

Medication	Dose	Route	Time to Administer	Reason	Specific Administration Instructions

\_\_\_\_\_

Prescribing Physician Printed Name

\_\_\_\_\_

Date

\_\_\_\_\_

Prescribing physician Signature

\_\_\_\_\_

Office phone number

Permission is granted for designated school personnel to administer these prescribed and /or parent-provided medication(s) to my child, as listed and approved by the prescribing physician. *\*My signature indicates that I am giving permission for JISD staff to contact the physician for additional information or clarification, if needed.*

Parent/Guardian Signature: \_\_\_\_\_ Contact Number: \_\_\_\_\_ Date: \_\_\_\_\_

Nurse Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*\*\*\*Please see back side of form for additional information regarding medication administration*



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### JISD Medication Administration Procedures

Whenever possible, please give medication at home. *For example, if medication is ordered three times a day: give before school, after school, and at bedtime.* For those medications that must be administered during school hours, the school nurse or other trained non-healthcare personnel may administer parent-provided medication when such treatment is necessary for school attendance and cannot be accomplished at home. If necessary for medication to be given at school the following conditions must be met:

- All medications **must** be FDA approved.
- The first dose must be given at home in case of an unexpected allergic reaction.
- Medication must be brought in by parent/guardian in the original container, properly labeled by the pharmacy. Parents must supply any special equipment needed to administer the medication.
- Medication will not be given without a specific written order signed by the physician and parent/guardian.
- *Changes in medication will require an updated medication form signed by physician and parent/guardian.*
- Medication must be kept in the clinic, with the exception of inhalers and epinephrine that a physician may deem necessary for the student to carry with them.

*This form is not applicable for students who receive parent-provided medications for severe allergies, asthma, or diabetes. Action plans for these specific health conditions are available on the Joshua ISD website.*

### End of the school year:

All medication must be picked up by parent/guardian from the clinic by the last day of school. Any medication left at the school will be disposed of.