



BETHLEHEM

AREA SCHOOL DISTRICT

AUTHORIZATION FOR MEDICATION DURING SCHOOL HOURS

Dear Parent/Guardian,

If your child needs to take medicine in school, the procedure is as follows:

1. A Medication Authorization Form or written statement shall be required from the family physician or dentist who shall indicate the following
 - a. The necessity of the medication being given to the child to the child during school hours
 - b. The Name of the medication
 - c. The time the medication is to be given
 - d. The dose
 - e. Any possible reactions the medications may have.

This procedure must be followed for prescriptions as well as over the counter medications.

2. Medication Authorization Forms and written statements from physicians or dentists are only good for one school year.
3. Medication is to be brought to school by a parent or guardian in the original pharmacy container. The container must be labeled with the following:
 - a. Name of student
 - b. Name of physician or dentist
 - c. Name of medication
 - d. Time to be given
 - e. The dosage
4. The first dose of any new medication will not be given in school for the child's safety.
5. If this procedure is not followed, the medication that is sent to school **WILL NOT** be given.
6. One the day of a school's late start or early dismissal, your child will not be given medication scheduled during these times, unless special arrangements are made with the school nurse.