

Over the Counter Stock Medication Order Form

For medications given in school, the New York State Education Department requires prior written approval from both a healthcare provider and the parent/guardian for both prescription and over the counter medication (OTC). There are certain common OTC products that the school nurse might stock that may be used with your additional permission to do so. Once completed, this form allows the school nurse to administer or apply OTC medication to your child during school hours.

To use the school stock medications listed below, you must give additional permission.

Student's Name: _____ **DOB:** _____ **Allergies:** _____

Medication	Indications for use and conditions under which medication should be administered. Please add indications if needed	Dosage and Route of Medication	Frequency and/or Time	Please initial if you do NOT want your child to take
Vaseline	Skin irritation	1 Topical application to site	As Needed	
Unscented hand/body lotion Specify brand: Eucerin/Lubriderm	Apply to dry, itchy skin	1 Topical application to site	As Needed	
Antiseptic Cleansing liquid Bactine, Band-aid antiseptic or generic	superficial lacerations/abrasions	1 Topical application to site	As Needed	
Hydrocortisone cream, Caladryl clear (or generic)	localized insect bite/itching/hive	1 Topical application to site	As Needed	
Calamine lotion or Rhuli Gel	localized itching/irritation	1 Topical application to site	As Needed	
Anbesol/Orajel (or generic)	tooth pain	1 Topical application to site	As Needed	
Cool Jel	minor burns	1 Topical application to site	As Needed	
Benadryl or generic	Allergic reaction	25 mg Under 60 lbs 50 mg 60 lbs or over	As Needed	
Antibiotic Ointment Neosporin/Bacitracin or generic	superficial cuts/abrasions	1 Topical application to site	As Needed	
Tylenol (acetaminophen)	Headache, pain or fever > 101° F	Dosage by weight	As needed	
Motrin (ibuprofen, Advil)	Headache, pain or fever > 101° F	Dosage by weight	As needed	

To be completed by Parent/Guardian:

I give the school permission to use their stock of OTC (over the counter) medication listed on this form.

Parent – Please sign here:

Date:

PLEASE HAVE YOUR DOCTOR SIGN BELOW THIS LINE:

I authorize the stock over-the-counter medications above to be administered to this student.

Name/Title of Licensed Prescriber: (please print)	License #:	Date:
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Signature:	Phone:
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Office Address:	
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New Paltz Central School District

Medication	Indications for use and conditions under which medication should be administered. Please add indications if needed	Dosage and Route of Medication	Frequency and/or Time
Acetaminophen Elixir (160mg/5ml) or 160 mg chewable tablet	Weight 24-35 lbs Headache, pain or fever>101° F	<u>5 ml (160 mg) oral</u>	As Needed
Acetaminophen Elixir (160mg/5ml) or 160 mg chewable tablet	Weight 36-47 lbs Headache, pain or fever>101° F	<u>7.5 ml (240 mg) oral</u>	As Needed
Acetaminophen Elixir (160mg/5ml) or 160 mg chewable tablet	Weight 48-99 lbs Headache, pain or fever>101° F	<u>10 ml (320 mg) oral</u>	As Needed
Acetaminophen tablets (325mg)	Under 12 years but >100 lbs. Headache, pain or fever>101° F	<u>325 mg oral</u>	As Needed
Acetaminophen tablets (325mg)	12 y/o or older or >100 lbs. Headache, pain or fever>101° F	<u>325 mg oral</u>	As Needed
Ibuprofen (Motrin/Advil) 200 mg	12 y/o or older or >100 lbs. Headache, pain or fever>101° F	<u>400 mg oral</u>	As Needed
Ibuprofen (Motrin/Advil) 200 mg	Under 12 years but >100 lbs. Headache, pain or fever>101° F	<u>400 mg oral</u>	As Needed
Ibuprofen (Motrin/Advil) 100mg/5 ml or 100 mg chewable tablet	Weight 24-35 lbs Headache, pain or fever>101° F	<u>5 ml (100 mg) oral</u>	As Needed
Ibuprofen (Motrin/Advil) 100mg/5 ml or 100 mg chewable tablet	Weight 35-47 lbs Headache, pain or fever>101° F	<u>7.5 ml (150 mg) Oral</u>	As Needed
Ibuprofen (Motrin/Advil) 100mg/5 ml or 100 mg chewable tablet	Weight 48-59 lbs Headache, pain or fever>101° F	<u>10 ml (200 mg) Oral</u>	As Needed
Ibuprofen (Motrin/Advil) 100mg/5 ml or 100 mg chewable tablet	Weight 60-71 lbs Headache, pain or fever>101° F	<u>12.5 ml (250 mg) Oral</u>	As Needed
Ibuprofen (Motrin/Advil) 100mg/5 ml or 100 mg chewable tablet	Weight 72-95 lbs Headache, pain or fever>101° F	<u>15 ml (300 mg) Oral</u>	As Needed
Ibuprofen (Motrin/Advil) 100mg/5 ml or 100 mg chewable tablet	Weight 96 lbs or > Headache, pain or fever>101° F	<u>20 ml (400 mg) Oral</u>	As Needed