Shawano School District

HEALTH SERVICES - Medication Administration Consent

❑ Hillcrest Primary School 715-524-2134 **(Fax) 715-524-1151**	❑ Shawano Middle School 715-526-2192 **(Fax) 715-201-4210** ***** NEW *****
❑ Olga Brener Intermediate School 715-524-2131 **(Fax) 715-524-9899**	❑ Shawano High School 715-526-2175 **(Fax) 715-524-8414**

Student Name: _____ **Date of Birth:** _____ **School Year:** _____

Student's Weight: _____ lbs. **Homeroom Teacher:** _____ **Grade:** _____

Medication Name/Strength: _____

Dosage: _____ Route: _____

Time(s) to be given:

- ❑ Before School
- ❑ Lunch
- ❑ PRN - Frequency _____ For what symptoms _____
- ❑ Other: _____

Effective Date:

- ❑ Entire School year, including summer school (if applicable)
- ❑ Start Date: _____ End Date: _____

Diagnosis/Reason for Medication: _____

Special instructions or relevant side effects: _____

_____

PARENT/GUARDIAN AUTHORIZATION - *I hereby release the Shawano School District Board of Education and its agents and employees from any and all liability that may result from my child taking the medication identified on this form. I give permission for the School Nurse to contact the physician named herein if any questions arise regarding the administration of this medication.*

Parent Name (please print): _____ Phone: _____

Parent/Guardian Signature: _____ Date: _____

PHYSICIAN AUTHORIZATION - *Prescribing Practitioner Authorization is REQUIRED for all medications that are prescribed or in doses that exceed the manufacturer recommendations.*

Medical Provider Name (please print): _____ Phone: _____

Clinic Name: _____ Fax: _____

Medical Provider Signature: _____ Date: _____

Please note: all medications must be dropped off and picked up by a parent/guardian or designated adult.

SHAWANO SCHOOL DISTRICT
MEDICATION GUIDANCE

Please avoid scheduling medications to be taken at school whenever possible. When this is not possible, we are happy to help by administering it in school as long as the policy requirements have been met.

1. All medication must be in the original bottle/package, with the child's name clearly marked on the container. All prescription medication must be in the original pharmacy container with correct information on the label as well as the child's name clearly marked on the container along with correct dosage and time to be given. Ask your pharmacy for a separate labeled container for school.

2. Parents must provide all supplies needed to give the medication including: measuring syringe, tablets pre-cut, and food if needed.

3. Non-prescription medication containers must show the recommended dose that is appropriate for the age of your child. Prescription bottle directions/dose must match the "Medication Administration Consent". Expired medications will not be given.

4. **Authorization Form:** A "Medication Administration Consent" form must be on file before any medication (prescription or non-prescription) may be taken at school. This is required even for short-term medications.

a. Both parent and physician authorizations must be completed for prescription medications.
b. Only the parent authorization is required for non-prescription medications. If the frequency/dosage is greater than package directions a physician signature is required.
c. A separate form is required for each medication.

5. The above rules still apply to any medication a student may need to carry with them, such as Epipens or inhalers. Both the medication & the medication form must be checked in at the school office at the beginning of the year.

6. Vitamins, supplements, and homeopathic remedies can be given at home and will not be administered in school. Consideration may be given with physician approval stating it is medically necessary to be given during the school day.

7. It is your responsibility to keep track of when your child will need a refill. The school will give reminders via phone call or letter.

8. A parent/guardian or designated adult must bring the medication into school. Do NOT send medications with your child.

The "Medication Administration Consent" can be found on the school website under Forms & Resources. A new form must be completed every year.

Please contact your school nurse with any questions.