



School fax #: _____

Provider Order for Medication Administration at School

Student: _____ DOB: _____

Allergies: _____

To be completed by a licensed medical provider for any prescribed or non-prescription medications the nurse will administer at school. Students may NOT carry controlled substances.
Schools can only administer FDA approved medications.

Diagnosis: _____ ICD-10 Code: _____

Medication: _____ Controlled substance: Yes ☐ No ☐

Dose: _____ Route: _____

Administer daily at: _____ and/or ☐ PRN every _____

for: _____ Side Effects: _____

☐ Dependent: Nurse administers ☐ Supervised: Student self-administers ☐ May Self-Carry ☐ May Self-Administer

Diagnosis: _____ ICD-10 Code: _____

Medication: _____ Controlled substance: Yes ☐ No ☐

Dose: _____ Route: _____

Administer daily at: _____ and/or ☐ PRN every _____

for: _____ Side Effects: _____

☐ Dependent: Nurse administers ☐ Supervised: Student self-administers ☐ May Self-Carry ☐ May Self-Administer

Diagnosis: _____ ICD-10 Code: _____

Medication: _____ Controlled substance: Yes ☐ No ☐

Dose: _____ Route: _____

Administer daily at: _____ and/or ☐ PRN every _____

for: _____ Side Effects: _____

☐ Dependent: Nurse administers ☐ Supervised: Student self-administers ☐ May Self-Carry ☐ May Self-Administer

Printed Name of Physician/Licensed Prescriber

Signature of Physician/Licensed Prescriber

Date

Clinic Name

Clinic Address

Clinic Phone Number

Clinic Fax Number

Medication Administration Requirements

Diagnosis, treatment of illness, and/or prescribing medications are the responsibility of Medical Professionals, not school personnel. School personnel will administer medications that have been prescribed by a licensed prescriber to be given during school hours with parent permission. Morning or evening medications should be given at home to avoid interruptions in the school day.

Both a signed prescribers order and the Parent Consent for School Medication Administration are required to be completed annually for a medication to be administered to your child from the health office during the school day.

- Parents/guardians must inform the building nurse when a student requires medications during the school day. Students observed by school personnel self-administering unauthorized medications shall be reported to their parents/guardians.
- Required for the administration of ALL medications. This includes prescription and over-the counter (i.e. Tylenol, Ibuprofen) medications. The prescribers order must include the student's name, date of birth, diagnosis, name of medication, dose, time to be given, date of order and signature.
- Prescription medication must be provided in a pharmacy-labeled container that indicates pharmacy name and telephone number, student's name, prescribers name, dosage of medication, and description of medication inside. Parent/guardian should request from the pharmacist a duplicate labeled bottle for the prescription if it will need to be given at home and school.
- Over-the-Counter medication must be in the original container.
- The building nurse will administer prescribed medication. In the absence of the nurse, the medication will be administered by a trained designee named by the principal, in consultation with Health Services Staff.
- Check the expiration dates of the medication(s). Expired medications will not be administered.
- Controlled Substances. A Parent or legal guardian is responsible for dropping off and picking up all medication(s) that are controlled substances.

Self-Administration of Medication Authorization Form is required to be completed annually for self-carry and self-administration. By completing this form, the parent/guardian is not requesting school personnel to store or administer the medication to the student. Parent/guardian will ensure the medication will be properly labeled for the student. Students are not allowed to self-carry controlled medications.

- Prescription asthma inhaler for asthma or reactive airway disease. A parent/guardian's written authorization and a review by RN with the student is required. (A physician's order is needed only if an inhaler is kept in the health office for nurse to administer).
- Epinephrine or other medication. A physician's order, parent/guardian written authorization, and a review by RN with the student is required.

Self-Administration of Non-Prescription Pain Relief Form is required to be completed annually for secondary students' self-carry and self-administration of:

- Non-prescription pain relief medication. A secondary student may possess and use non-prescription pain relief in a manner consistent with the labeling. The district may revoke a student's privilege to possess and use non-prescription pain relief if the district determines the student is misusing or abusing this privilege.
- Ephedrine or pseudoephedrine containing products. This form does not allow students to possess or use any non-prescription medications with ephedrine or pseudoephedrine as an active ingredient.

All medication forms are available on the ISD 279 district website under Services > Health Services-> Forms, <https://www.district279.org/services/health-services> or can be requested from the building nurse at your child's school.