



Medication Permission

Student's Name:		Photo:
Date of Birth:	Grade/Teacher:	
Medication:		
Dosage:	Route:	
Purpose of Medication:		
Time medication to be given at school:	Frequency (e.g. daily):	Note Special storage requirements <input type="checkbox"/> None <input type="checkbox"/> Refrigerate <input type="checkbox"/> Other (please specify):
Anticipated number of days medication will be given at school: <input type="checkbox"/> Until the end of the current school year <input type="checkbox"/> _____ weeks <input type="checkbox"/> _____ days	Is child allergic to any food, medicines, or other items: <input type="checkbox"/> No <input type="checkbox"/> Yes(list allergies):	
Special considerations/instructions:		
Possible side effects:		

Physician's Signature

Date

***Physician signature is required if medication to be administered at school for longer than 30 days.

PARENT CONSENT

I hereby give permission for my child to be given medication at school as stated above. I understand it is my responsibility to provide this medication including the secure transport and delivery of this medication to school. I authorize the school nurse and physician's office to communicate regarding my child's medications.

Parent Signature

Date

Complete Medication Administration regulation may be viewed on District web site:

<http://www.campbellcountyschools.net/>

All Medications

- All medication administered by school personnel must be approved by the U.S. Food and Drug Administration (FDA). Information on dosage, side effects and contraindications of any medication or medicinal-like substance, e.g., homeopathic and herbal remedies, given by school personnel, must be readily available from a professionally acknowledged resource (PDR or other U.S. published drug reference book, FDA or USP website, etc.).
- School personnel have the right to refuse to administer any prescription, over-the-counter, or other medication and may seek medical opinion or advice pertaining to medication administration.
- Medication provided by the parent/guardian, must be in the original container in which the medication was purchased which should clearly state, at minimum, the name and strength of the medication and its proper use.
- The parent/guardian assumes full responsibility for the supply, appropriate delivery and handling, and security of all medication.
- All prescribed medication will be retrieved by parent/guardian or disposed of by the school nurse at the end of the prescribed administration period or by the end of each school year, whichever occurs first. At the end of the school year, the parent/guardian is asked to retrieve any leftover personal medication stored in the Nurse's Office. Medications not returned to the parent/guardian will be discarded in an appropriate and legal manner.
- CCSD nurses will not administer IV medications.

Non-Prescription/Over-the-Counter Medications

- If a parent/guardian wishes administration of an over-the-counter medication not supplied by the school, the parent/guardian will complete a "Medication Permission" form and provide the school with the medication.
- Over-the-counter medication brought from home must be in its original container and labeled with the student's name.
- Administration of over-the-counter medication sent from home will be at the discretion of the school nurse and according to the manufacturer's recommendations.

Prescription Medications

- Prescription medication will be dispensed by a school nurse, principal, or other designee, only when authorized in writing by the student's parent/guardian per completion of a "Medication Permission" form.
- If instructions and the permission form are not provided with the medication, the nurse may obtain verbal permission and instructions from the parent/guardian for administering the medication. However, a permission form should be completed by the parent/guardian within 24 hours of the nurse contact.
- Parent/guardian consent must be renewed annually.
- No student will be given prescription medication except upon order from a U.S. licensed physician, nurse practitioner, physician assistant, dentist or optometrist who has the responsibility for medical management of the student.
- If prescription medication is to be given at school longer than 30 days, the student's physician must complete and sign the "Medication Permission" form.
- A written order from the prescriber must accompany any changes in medication dosage or administration schedule.
- Administration of medication during the school day must be medically necessary. Parents should give medications outside of school hours whenever possible.
- The school nurse will determine the schedule for medication administration unless specified by the prescriber.
- Reasonable efforts will be made to ensure that the student receives his/her medication. If a student persistently skips medication doses, the parent/guardian will be notified.
- The first dose of a new medication shall not be administered by school personnel.