

Notice to Parents Regarding Medication Policy

To: Parents
From: _____
Date: _____
Subject: Medication Policy

To protect your child's safety, the school nurse and/or health aide will adhere to the following medication policy. Beginning in August, 1996 it is required that **BOTH** parent's **AND** physician's signature are on file before any prescription **OR** non-prescription medication is administered. This includes all medications including such over-the-counter products as Tylenol, Advil, Dimetapp, etc.

Although this may cause some inconvenience, we feel that this policy is best for the continued protection of your child, and must be followed. **If we do not have your written permission and the written permission of your physician, the medication will not be given.** Permission forms can be obtained by contacting your school nurse or health aide.

In order for your child to receive any medication at school, please conform with the following:

- A written request must be obtained from the doctor and the parent/guardian. This request must include the name of the medication, dosage, time it is given during school hours, and duration.
- The medication must be in its original container and have a fixed label which indicates the student's name, name of medication, dosage, method of administration and time of administration.
- When the empty prescription bottle is returned to you, please send the refill to school promptly.
- The medication and the signed permission forms must be brought to the school by the parent or guardian.
- Wherever possible, please include a photo of your child with the permission form.
- New permission forms must be re-submitted each school year, and are necessary for any changes in medication orders.
- If your child is taken off medication or will no longer receive it at school, please put your request in a dated, written note as soon as possible. If the medication is not picked up from the health aide or school office within 10 days, it will be properly disposed.

Please contact the _____ or his/her designee if you have any questions. Thank you for your cooperation.