



# SCHOOL DISTRICT OF CLAYTON

## PERMISSION TO ADMINISTER MEDICINE

### AUTHORIZATION FORM

Parent/Guardian will provide the school with medication in a prescription bottle or original container if medication is over-the-counter. Will **NOT** accept any pills in baggies, etc. No medication will be given without appropriate packaging/dosing instructions.

**(PLEASE PRINT)**

STUDENT NAME \_\_\_\_\_ GRADE/TEACHER \_\_\_\_\_

NAME OF MEDICATION \_\_\_\_\_

REASON FOR MEDICATION \_\_\_\_\_

PRESCRIPTION \_\_\_\_\_ OTC \_\_\_\_\_ DOSE \_\_\_\_\_ TIMES GIVEN \_\_\_\_\_

FORM OF MEDICATION \_\_\_\_\_ TABLET/CAPSULE \_\_\_\_\_ INHALER \_\_\_\_\_ LIQUID \_\_\_\_\_ NEBULIZER \_\_\_\_\_ INJECTION \_\_\_\_\_

PHYSICIAN'S NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

I request and authorize school personnel to give this medication to this student and to contact the physician directly if there are any concerns about the medication or the student's condition. I understand that I have the ultimate responsibility for providing the school with an adequate supply of medication and to inform the school immediately if any information provided on this form changes OR if the administration of the medicine should stop. The school nurse will not be held liable for any effects as a result of giving the medication.

PLEASE PRINT: PARENT/GUARDIAN NAME \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

DAY-TIME NUMBER \_\_\_\_\_ EMAIL \_\_\_\_\_

Metered-dose inhalers for students with asthma may be carried by students provided a licensed professional's order is received and the parent/guardian has signed a District waiver.



IF YOU ARE PROVIDING AN OTC MEDICATION THE FOLLOWING AUTHORIZATION MUST BE COMPLETED BY A PROFESSIONAL LICENSED TO PRESCRIBE.

NAME OF PATIENT \_\_\_\_\_

CONDITION BEING TREATED \_\_\_\_\_

MEDICATION \_\_\_\_\_

DOSAGE + TIMES \_\_\_\_\_ DURATION \_\_\_\_\_

POSSIBLE SIDE EFFECTS AND/OR COMMENTS \_\_\_\_\_

\_\_\_\_\_

PHYSICIAN'S NAME/PLEASE PRINT \_\_\_\_\_

PHYSICIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_