

CONSENT TO ADMINISTER PRESCRIPTION MEDICATION

It is strongly recommended that medication be administered at home if at all possible. ALL MEDICATION must be kept in the Health Office. If students must take medicine at school, either by physician's order or parent's request, the following guidelines will apply:

Administration of Medication Prescribed By A Physician

- The law (ARS15-344) requires that medication must be delivered to the nurse in the prescription container as prepared by the pharmacist. The number of pills may be documented upon receipt by the school nurse.
- The prescription label must bear the student's name, current date, name of medication, dosage and the time to be given.
- Please ask your pharmacist to fill the prescription in both home and school containers.
- It is recommended that no more than a 30 day supply be maintained at school.
- The school nurse may consult with the physician regarding medication.

PLEASE COMPLETE THE FOLLOWING FORM AND RETURN IT TO THE SCHOOL NURSE

STUDENT'S NAME		BIRTHDATE	TEACHER		GRADE
TREATMENT TIMES	FREQUENCY		FROM (DATE)	END (DATE)	

Given with the following medications (*medications must be in the prescribed container*):

MEDICATION	DOSAGE
MEDICATION	DOSAGE
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- Yes No Small volume nebulizer may be administered at the discretion of:
(check appropriate box) School Nurse Parents Student
- Yes No Small volume nebulizer may be administered for wheezing that is not relieved by the metered dose inhaler
- Yes No Small volume nebulizer may be administered prior to P.E./ Athletic competition
- Yes No Notify parents each time prior to administration of small volume nebulizer

I wish to have my child receive small volume nebulizer therapy as described above.

Signature of Parent/Guardian

Date

Signature of Physician
(optional at discretion of parent/nurse/physician)

Date

COMMENTS: _____