

MSAD#75
Permission To Administer Medication That Must Be Taken
During School Hours

Student's Name: _____ Date _____

Grade/Homeroom Teacher: _____

Name of Medication: _____ Pharmacy: _____

Prescribing Physician: _____ Telephone: _____

Reason for Medication: _____

Dosage: _____ Time(s) To Be Administered: _____

Possible side effects and safety procedures: _____

Prescribing physician's signature or prescription label Date

.....
Medication Removal:

At the end of the school year or the last day of student's enrollment, I choose the following method of medication disposal. I understand that if the medication is still in school seven (7) days after the last student day; the medication will be disposed of.

- Parent will remove medication from school
- Send the medication home with my child
- School nurse may dispose of the medication

I understand that the above medication may be administered by any staff member who is the principal's designee. This may include a school nurse or a medically unlicensed person designated by the principal as allowed by law.

Permission to contact prescribing Physician

I give my permission for the school nurse to contact the above prescribing physician to obtain information about the medication and the administering schedule. I give my permission for the school nurse to share information with the doctor about the effects of the medication on my child's learning.

Telephone: (H) _____ (w) _____

Parent or Legal Guardian's Signature

Return to: Marla Blake, RN MEd
Mt Ararat High School
73 Eagles Way
Topsham, ME 04086
(207) 729-2951 X264
(207) 725-0143 fax

Instructions for Parent/Guardian For Authorization of Medication

It is the policy of MSAD #75 Schools that only essential medications will be administered to students in school. Whenever possible, the schedule of medication administration should allow a student to receive all prescribed doses at home.

If a student needs medication during school hours, please follow these instructions:

1. Complete the "Permission To Administer Medication" form and return it to the school office with the medication. A physician's prescription (current prescription label or signed note) will be required for prescription drugs and will be required for over the counter drugs if the dosage is greater than what is recommended on the bottle.
2. Send the medication to the school office in an original, unbreakable container that is properly labeled with the name of the medication, date, dosage, time(s) to be administered and the name of the student who is to receive it.
3. Medication sent to school should not exceed the dosage for one day unless prior arrangements have been made with the school nurse.
4. Refer to the complete MSAD#75 Medication Policy as necessary.