



Highland Middle School

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Amy Anderson

Principal

Physician's Request for Administration of Medication During School Hours

Date: _____

Dear Sir:

The parent/ guardian of (student name) _____ has requested that school personnel administer the following medication(s): _____
to (student name) _____ during school hours.

It is our procedure to request that medication be given before or after school hours whenever possible. If it is essential that the student receive the medication(s) during school hours, please complete the following:

Name of Medication	
Diagnosis	
Dosage	
How administered (oral or injection)	
Time schedule for administering	
Duration of medication to be administered	
Possible side effects or contradictions	
Special handling & storage instructions / directions	
Curtailment of specific school activity (sports, shop, lab, driver's training, gym, etc.)	
Other medications prescribed by Physician that student is taking outside school hours	
Is student capable of self-administration?	YES / NO

Physician's Signature _____

Phone Number _____

Parent / Guardian Signature: _____

Consent Form For Prescription Medications

I request that school personnel administer the following prescribed medications to (student name) _____ according to the directions from our attending physician.

As parent / guardian, I/we hereby release Blackhawk School District and all its employees from any and all liability for damages our child may suffer as a result of this request.

Parent / Guardian Signature: _____

Date: _____

MEDICATION PROCEDURE / GUIDELINES

Blackhawk School District

It is the policy of the Blackhawk School District that any prescription or non-prescription medication / drug, which has been certified by a physician, dentist, physician assistant, or nurse practitioner as necessary for the student to receive during school hours, be administered in accordance with the following guidelines.

Medication in School

According to school policy, NO student is allowed to carry medications of any type on school properties (except inhalers prescribed by a doctor).

Whenever possible, medication administration must be scheduled at times other than during school hours. Medications prescribed or requested to be given three times a day or less will not be given at school unless a specific time during school hours is prescribed by a physician, dentist or nurse practitioner.

1. A parent / guardian requesting that medication be administered to the student at school will submit the required forms in advance of the administration of the medication. The appropriate forms are available in the Health Office of each building.
2. The medication form must be signed by the doctor with the student's name, the name of the medication, dosage, and the scheduled time to be dispensed, along with parental permission (see attached forms). A new form completed by the physician will be required with each change in the medication, and at the beginning of each school year. This is used as the physician's prescription / orders.
3. Medications must be delivered to the Health Office by a parent/guardian or designated adult. The original container must be properly labeled by the pharmacist. The parent must ask the pharmacist to provide a second bottle with the proper labeling for in-school use.
4. All controlled drugs, such as Ritalin, Adderall, Tylenol with codeine, etc., must be counted by the parent/guardian and a designated school employee before being accepted by the school.
5. Nonprescription medication (over-the-counter medications) including herbal remedies/supplements will only be dispensed at school if ordered by a physician, dentist, physician assistant or nurse practitioner.
6. It will be the student's responsibility to come to the office at the appropriate time for his/her medication.
7. Injectable medication will not be administered to students by school district staff (other than nurses) except in the case of Epi-pens. Appropriate staff will be trained in the administration of injectable Epinephrine for those students with a physician's order for its use.
8. All unused medication must be picked up by the parent/guardian or designated adult at the end of the school year. Any medication unclaimed by the parent will be destroyed by the nurse when a prescription is no longer to be administered and at the end of each school year.
9. A school employee may refuse to administer any medication that exceed the recommended dosage by the manufacturer and/or Physician's Desk Reference.