

970-506-7000 Phone 970-506-7070 Fax www.universityschools.com

Medication Physician and Parent Authorization

- For all medications (prescription or over-the-counter) to be given in school or on field trips.
- If a student has a Colorado Department of Education Standardized Health Care Plan for Asthma, Allergies, Seizures, or Diabetes signed by health care provider and parent, this form does not need to be completed.

Name of Stude	ent:	Birthdate:
Grade:	Teacher/Advisor:	
	Physician Auth	norization for Medication
Name of Medic	cation:	
Purpose of Med	dication/Diagnosis:	
Dosage (amour	nt and timeline, please be specific on "	as needed" orders):
Route:	Time of Day medication is to be	e given (Specific Time/s):
Length of time	medication is to be given (days, week	s, months, school year):
Possible Side I	Effects:	
Printed Physici	ian's Name:	Clinic:
Physician Phor	ne Number:	Fax:
Physician's Sig	gnature:	Date:
	NOTE Medications must be kep	pt in the original labeled bottle or container.
	Parent Authorization	for Medication Administration
school as order reviewed with	red by the physician above. I understa my student the University Schools Pol	to take medication at nd that it is my responsibility to provide this medication. I have icy regarding the sharing of prescription medication at school, oppropriate use of prescription medication.
Medication to	be taken at school:	Dosage and Time:
Parent/Guardia	nn Printed Name:	
Signature:		Date:

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Medication in Schools

Parent Information

Parents have the primary responsibility for the health of their children. This includes the administration of medicine. **University School Personnel encourages medicines to be taken at home if at all possible.** Many medicines may be taken before school hours and/or after school hours. Medications given three or more times a day can usually be given at home. Medication will be given following state laws only. It is required that medications be kept in the Health Office for the safety of all students.

When school personnel are asked to assist the student in taking medications, the following procedures must be followed:

General Instructions

- It is the responsibility of the parent to bring any medication to the school health office. This is very important for the safety of all children.
- Medicine will be given only following state requirements.
- It is the responsibility of the child to request the medicine from the School Nurse or other delegated person in the school.
- It is the responsibility of the School Nurse to make the medicine available to the student or delegate this task to another staff member who has the appropriate training.
- Written authorizations are valid for the current school year.
- It is the responsibility of the parent to notify the School Nurse of any changes in the medicine. (dosage, times, etc)

Prescription Medication

- A signed permission slip from a parent or guardian must be on file.
- A written authorization from the child's physician is required.
- The medication must be provided by the parent/guardian in an individual pharmacy labeled bottle for the student who is to receive it. Medication will be given as directed on the pharmacy label and physician's order.

Non-Prescription/over-the-counter Medication

- A signed permission slip from a parent or guardian must be on file.
- A written authorization from the child's physician is required.
- Non-prescription medication must be in the original pharmaceutical container.
- Homeopathic preparations must have physician's authorization.

It is the responsibility of the parent to pick up their student's medicine at the end of the school year or it will be disposed of by the School Nurse.