

AUTHORIZATION TO ADMINISTER PRESCRIBED MEDICATION

Part I – To be completed by the Parent/Guardian

I hereby request and authorize The Newport School personnel to administer prescribed medication as directed by the physician (part II below). I agree to release, indemnify and hold harmless staff member or agents from lawsuit, claim demand, or action etc. against them for administering prescribed medication to this student, provided The Newport School staff are following the physician's orders as written in Part II below. **I have read the procedures outlined on the back of this form and assume the responsibilities as required.**

Student: _____ Birth date: _____

Prescription: Renewal New (if new, the first full day's dosage was given at home on: _____)

List all medication(s) student is taking (including over the counter medications): _____

Parent/Guardian signature

Date

Phone #

Part II – To be completed by the Physician

The Newport School discourages the administration of medication to pupils in school during the school day. Any necessary medication which possibly can be administered before or after school should be prescribed. Only non-parenteral medications are administered except in specific emergency situations. School personnel will, when it is absolutely necessary, administer medications to pupils during the school day and while participating in outdoor education programs and overnight field trips according to procedures outlined on the back of this form.

Student: _____ Diagnosis: _____

Medication: _____ Dosage & Times to be given at school _____
(trade name or generic)

Routine of Administration: _____ If PRN specify _____
Effective Date: from _____ to _____

Side effects: _____

Physician's Signature

Date

Phone #

Part III – To be completed by the Health Supervisor

Check as appropriate

- Part I and II above are completed including signatures. (It is acceptable if all items of information in Part II are written on the physician's stationary/prescription blank.)
 - Prescription medication is properly labeled by a pharmacist.
 - Medication label and physician order are consistent.
 - Over the counter medication is in an original container with the manufacturer's dosage label and safety seal intact.
- _____ date any unused medication is to be collected by the parent (within one week after expiration of physician's order).

Health Supervisor signature

Date

AUTHORIZATION TO ADMINISTER PRESCRIBED MEDICATION

Information/Procedures

1. No medication will be administered in school or during school sponsored activities without the Parent/Guardian written authorization and a physician order.
2. The Parent/Guardian is responsible for obtaining the physician's statement, Part II. The Health Supervisor will ensure that all items on the form are completed. A physician may use office stationary/prescription pad in lieu of completing Part II. Information necessary includes: student name, diagnosis, medication name, dosage, and time of administration, duration of medication, side effects, physician signature and date.
3. The medication must be hand-delivered to the school by the Parent/Guardian or, under special circumstances, an adult designated by the parent. It should be properly labeled by a pharmacist, and be consistent with the physician's order. In NO circumstances will school personnel administer medication brought to school by the student.
4. Physician samples must be appropriately labeled by the physician.
5. The first day's dosage of any new prescription must be given at home.
6. No non-emergency medication will be continued beyond the school year in which it is ordered.
7. The Parent/Guardian is responsible for submitting a new form to the school each time there is a change of dosage or time of administration. The Health Supervisor will change the label on the existing bottle after receiving the physician's order. The parent provides medication for as long as it is prescribed.
8. All medication kept in school will be stored in a locked area accessible only to authorized personnel.
9. One week after expiration of the effective date on physician's order, the Parent/Guardian must personally collect any unused portion of the medication. Medication not claimed within that period will be disposed of.
10. The Newport School does not assume responsibility for medication not prescribed by a physician or medication administered by the student himself/herself.
11. In no case may any school staff member administer any medication, even over the counter medication such as Tylenol, outside the framework of the procedures outlined above.