Medina County
board of developmental disabilities

Student Administration of Medication Form

FORM #3

Student's Name:_____ Date of Birth _____ School _____

Student's Address:_____

Reason for Medication:_____

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TO BE COMPLETED BY PHYSICIAN

Medication	Dosage/Route	Time to be Administered	Adverse Reactions to be Reported	Date Medication Begins/Ceases
				____/____
				____/____
				____/____
				____/____
				____/____
				____/____
				____/____
				____/____
				____/____

Special instructions if any:_____

_____

DURING FIELD TRIPS, MEDICATION **MAY/MAY NOT** BE **DELAYED/OMITTED** = PLEASE CIRCLE.

Authorization is given for physical and/or occupational therapy evaluation. ☐ Yes ☐ No

_____/_____ **NPI #**_____

Physician's Name (**PRINT**) Signature (**NO STAMPS**)

Date _____ Office Phone Number _____

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TO BE COMPLETED BY PARENT/GUARDIAN

I HEREBY GIVE THE PERSONNEL OF THE Medina County Board of DD permission to administer the above prescribed medication to my son/daughter.

_____ _____ _____ _____

Student's Signature Date Parent/Guardian Signature Date

MEDICATION GUIDELINES

1. This form must be completed and the original returned to school nurse for any medication to be administered during program day by school personnel. This includes prescription/non-prescription medication, oral or topical. More than one medication may be listed on one form.
2. This form must be signed by the physician and legal guardian.
3. If the medication is changed, a new form is required. Notify the school nurse when medication is discontinued.
4. All medications (nurse or self -administered) must be in a pharmacy labeled container. The label must include the student's first and last name, name and strength of medication, amount to be taken, and time to be taken.
5. No more than one week's supply of a medication should be sent to the school at a time.
6. Student's self- administering medication should have the self -medication assessment form completed and on file with the school nurse. Only a daily dose of medication should be sent to the school with the student who self-administers.