

MEDICATION POLICY

(Dispensing Medication in School)

Before any medication can be given, a “parent permission” form must accompany the medication.

Only medication which is necessary for a child to remain in school will be given during school hours.

Each student’s medication must be in a properly labeled container with the following information:

- Student’s name
- Physician/dentist’s name
- Date
- Name of medication
- Dosage
- Directions for administration
- Duration medication is to be given

(TCCED Health Manual)

Administration of daily medication is recorded on a daily log in the office.

IN NO CASE SHALL CHILDREN CARRY THEIR OWN MEDICATIONS FOR SELF-ADMINISTRATION WHILE ON SCHOOL PREMISES.

Medication Permission Form
St. Joseph School, Yoakum Texas

Student _____ Date _____

Name of Medication to be given _____

Amount per time _____

Method of Administration Oral _____ Other _____

Time to be Administered _____

Number of days from the date above that medication is to be administered to the student _____

Will there be any restrictions on school activity for the student while receiving this medication? If "yes", what is the nature of the restriction and how long will the restrictions of activity exist?

Nature of restriction of activity _____

Length of time of restriction of activity in days _____

I understand that this medication will be given by the school principal or the principal's designee. I further release the school and its personnel from any liability resulting from any untoward affects that this medication may cause when dispensed at school. I understand that if I do not agree to and sign the Medication Permission Form, that the medication will not be administered at school.

Signature of Parent or Guardian

Date

