

Skokie School District 68
Administration of Prescription Medication/ Over The Counter Medication
Authorization Form 2011 – 2012
(Please read both sides of this form)

Student's Name _____ **Birth Date** _____ **Grade** _____
(please print)

Name of Drug _____
(This includes acetaminophen, ibuprofen, cough drops, etc.)

Dosage _____ **Time Interval** _____

Special instructions (medical conditions, possible reactions, side effects, other medications student is taking, etc.)

****EACH MEDICATION, EITHER PRESCRIPTION OR OVER THE COUNTER, MUST BE IN ITS ORIGINAL CONTAINER AND MUST BE CLEARLY LABELED WITH THE STUDENT'S NAME, GRADE, AND TEAM.****

Both the physician and parent must sign below

Physician's Name (printed) _____

Physician's Signature _____

Physician's Address _____

Phone Number _____

Date _____

I hereby authorize school personnel to administer the above medications to my child during school hours. Annual renewal of this authorization form is required.

Parent's signature _____ **Date** _____

(Over)

Administering Medicine

Medicine will be administered by district health personnel only in exceptional circumstances where the prescribed medication interval requires that it be administered during school hours and when the parent requests and a physician certifies that the timing of such medication requires administration in school. Additionally, students may be given acetaminophen, ibuprofen or cough drops at school by district health personnel as long as there is a completed

Administration of Prescription Medication/Over the Counter Medication Authorization form on file. **Each** medication, both prescription and over the counter, must be brought to school by a parent/ guardian, and must be in its original container with the student's name, grade, and team clearly labeled on the bottle. School health personnel will **not** administer injections, except to assist students with emergency medication for diabetes and allergies, when a physician has provided the school with instructions for such injections and the parent has requested such assistance.