



Orange County Department of Education
Instructional Services

PARENT/GUARDIAN AND AUTHORIZED HEALTH CARE PROVIDER REQUEST FOR MEDICATION

Name of Student: Birthdate:
School/District: Teachers Name: Grade/Track:

PARENT/GUARDIAN REQUEST FOR THE ADMINISTRATION OF MEDICATION
PRESCRIPTION AND NONPRESCRIPTION

California Education Code Section, 49423 allows the school nurse or other designated non-medical school personnel to assist students who are required to take medication during the school day.

I request that medication be administered to my child in accordance with our authorized health care provider written instructions. I understand that designated non-medical school personnel may assist in carrying out written orders under supervision of a qualified School Nurse.

Emergency medicine such as EpiPen or inhalers may be carried by the student when recommended by an authorized health care provider and parent. Back-up medication should be kept at school for emergency use.

Parent/Guardian Signature: Date:

Telephone: (Work) (Home)

AUTHORIZED HEALTH CARE PROVIDER REQUEST FOR ADMINISTRATION OF MEDICATION

Reason for Medication:

Medication: Dose: Route: Time:

If PRN: Amount of time between doses Maximum number of doses per day.

Possible medication reactions:

Instructions for emergency care

Authorized Health Care Provider Signature:

Authorized Health Care Provider Name (print clearly):

Telephone

Date of Request:

Date to Discontinue Medication:



Office Stamp

Regarding EpiPen/Inhalers: It is my professional opinion that this student should be permitted to carry/self administer this emergency Inhaler/EpiPen. This student has been instructed in, and demonstrates an understanding of proper usage.

Health Care Provider Initials

SCHOOL USE:

Reviewed by: Date:

This request is valid for a maximum of one year.



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***PARENT NOTIFICATION FOR THE
ADMINISTRATION OF MEDICINE AT SCHOOL***

Name of Student: _____

TO THE PARENT/GUARDIAN:

Medical treatment is the responsibility of the parent/guardian and an authorized health care provider. An authorized health care provider is an individual who is licensed by the State of California to prescribe medication. **Medications, both prescription and over the counter**, may be given at school when it is deemed absolutely necessary by the authorized health care provider that the medication be given during school hours. **The parent/guardian is urged, with the help of your child's authorized health care provider, to work out a schedule of giving medication at home whenever possible.**

California Education Code, Section 49423 allows school personnel to assist in carrying out an authorized health care providers written orders. Designated non-medical school personnel may be assisting with your child's medication. They will be trained and supervised by credentialed school nurses. Medication will be safely stored and locked or refrigerated, if required.

Emergency medicine such as EpiPens or inhalers may be carried by the student **when recommended by a authorized health care provider and parent**. When appropriate, the school nurse will evaluate the student's ability to safely self-administer the medication based on written district guidelines. (Title 5). Back up medication should be kept at school for emergency use. Students who have a serious medical condition (diabetes, epilepsy, etc.) should have an emergency supply of their prescription medication at school with the appropriate consent forms in the event of a disaster.

**IF MEDICATION IS TO BE ADMINISTERED AT SCHOOL, ALL OF THE FOLLOWING
CONDITIONS MUST BE MET:**

1. A written statement signed by the licensed authorized health care provider/dentist specifying the reason for the medication, the name, dosage, time, route, side effect; and specific instructions for emergency treatment must be on file at school.
2. A signed request from the parent/guardian must be on file at school.
3. Medication must be delivered to the school by the parent/guardian or other responsible adult.
4. Medication must be in your child's original, labeled pharmacy container written in English.
5. All liquid medication must be accompanied by an appropriate measuring device.
6. If pill splitting is required to obtain the correct dose of medication to be administered, only pills that are scored may be split, scored pills may be split in half only, and a commercial pill splitting device should be used for correct splitting.
7. Over the counter medication that has been prescribed by an authorized health care provider must be in its original container.
8. A separate form is required for each medication.

NOTE: Whenever there is a change in medication, dosage, time, or route the parent/guardian and authorized health care provider must complete a new form. Please discuss your authorized health care provider's instructions with your child, so that he/she is aware of the time medication is due at school.

This request is valid for a maximum of one year.

**ALL OF THE FOLLOWING ITEMS MUST BE COMPLETE
BEFORE RETURNING MEDICATION AUTHORIZATION TO THE HEALTH OFFICE**

- Parent signature
- Reason for medication, dose and numerical time to be given
- Office stamp of health care provider
- Health care provider initials in the space provided at the bottom of the form if Epi-pen or inhaler is to be carried by student.
- A separate form is required for each medication.

Please note:

- Only an adult can bring a sealed bottle or packet of ordered medication to the Health Office.
- Over-the-counter medications must be in original packaging, unopened.
- Prescriptions must be in the original bottle or packaging.
- Medications must not expire prior to the end of the school year.
- Medication authorizations are only valid until the end of the current school year.
- All medication must be signed out at the end of the school year by an adult.
- We will not accept medication without an authorization.
- **No exceptions will be made.**

Please contact the Health Office with any questions.

714-560-0900 ext 4101

Health.office@ocsarts.net