

# Community High School District #128

Libertyville High School  
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## MEDICATION FORM

*District 128 medication procedure is on the reverse side of this form. Do not use this form for epinephrine auto-injectors or asthma inhalers/medication - please use the Food Allergy and/or Asthma Action Plan forms.*

**STUDENT NAME:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

### TO BE COMPLETED BY THE LICENSED PRESCRIBER (MD/APN/PA-C):

**Medication/Dosage/Frequency:** \_\_\_\_\_

Duration (Length of time to be given): \_\_\_\_\_

Diagnosis or symptom for which medication is given: \_\_\_\_\_

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Duration (Length of time to be given): \_\_\_\_\_

Diagnosis or symptom for which medication is given: \_\_\_\_\_

**Medication/Dosage/Frequency:** \_\_\_\_\_

Duration (Length of time to be given): \_\_\_\_\_

Diagnosis or symptom for which medication is given: \_\_\_\_\_

**Other medications student is taking at home:** \_\_\_\_\_

**Licensed Prescriber (print name):** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Fax #:** \_\_\_\_\_

**Date:** \_\_\_\_\_

### TO BE COMPLETED BY PARENT:

I have read and understand the medication administration procedure for District 128. I request and authorize medication to be given to my child.

Parent signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **District # 128 Procedure for Administration of Medication to Students**

Medication shall not be administered to a student at school unless absolutely necessary to maintain the continued attendance of the student. This policy shall apply to both prescription and nonprescription medication. If it is determined that medication must be given to a student at school, the procedure set forth below shall be followed.

1. Medication shall be administered by the certified school nurse, or a certified employee designated by the superintendent.
2. The student's physician shall provide written orders detailing the name of the student, the diagnosis for which the medication is ordered, the name of the medication the commencement date and the expiration date of the drug therapy, the desired benefits of the medication, and an emergency number where the physician can be reached. In addition, the physician's written order shall indicate any expected reactions to the medication and shall advise school personnel of adverse symptoms for which to watch. The physician shall detail steps to be followed if the student experiences an adverse reaction. The order shall be renewed periodically.
3. The student's parent or guardian shall provide to the nurse a signed authorization to administer the medication, which has been ordered by the physician. The authorization shall include the parent or guardian's name and telephone number for use in case of an emergency.
4. Medication shall be brought to school and given to the nurse in the original package or an appropriately labeled container. Prescription medication shall display: student's name, prescription number, medication name and dosage, administration route or directions, date and refill, licensed prescriber's name, pharmacy's name, address, and phone, and name or initials of pharmacist. Over-the-counter medication shall be in the original container with manufacturer's label listing all contents, the student's name affixed to the label. Medication should be delivered to the school by the student's parent or guardian.
5. Medication shall be kept in a safe, locked place at school.
6. The school nurse shall keep a written record of all medication administration. This record will include: students' names, medication, dosage, time, date, who administered medication, and absenteeism or other reason for missed dosage. This record will be placed in the student's health file along with the physician's written order and the parental authorization to administer the medication.
7. The student's parent shall remove any unused medication from the school at the end of therapy, or the end of the school year. If the parent fails to remove unused medication, the school nurse will appropriately dispose of it in the presence of a witness.

No medication will be administered to students unless these guidelines are followed. If it is determined by physicians or parents that a student should retain medication on himself/herself for self-administration, it is recommended that the parents inform the school nurse of the situation, but the school assumes no responsibility for administering medication unless the above guidelines are followed.

A student with asthma may self-administer his or her prescribed asthma medication provided that the following information is kept on file in the Health Office: the student's parent/guardian will provide a parental written authorization for the self-administration of medication, and a written order from the student's physician containing the following information: name and purpose of medication, prescribed dosage, and time or special circumstances under which the medication is to be administered.

All controlled substances prescribed by a physician, must be administered by the school nurse.

The superintendent shall have the discretion to reject requests for the administration of medication subject to the requirements of the Individuals with Disabilities Education Act and Section 504 of the Rehabilitation Act of 1973.