



Permission to Administer Medication at Camp

NOTICE TO PARENTS: *The parent/legal guardian must bring medication directly to the school nurse in the container supplied by the pharmacy with an appropriate label.*

1. *Whenever possible, avoid prescribing medications for administration during school hours, especially medications to be administered for a short period of time. (ie. Antibiotics)*
2. *Medication brought into school is required to have appropriate pharmacy label on container. All medications will be kept locked in a secure cabinet in the nurse's office.*
3. *Carrying of inhalers or emergency medications (ie. Epinephrine auto-injector) is discouraged, because these items are easily forgotten or lost, which could leave the student in a possible medical crisis without medication. If the student must carry own medication, **then a second inhaler is REQUIRED to be left in the nurse's office.** If the student is carrying an epinephrine auto-injector, a **second epinephrine auto-injector MUST be stored with school nurse.***
4. *Any change in prescription requires a new written order from the prescriber. Verbal orders are not accepted.*

Name of Student:	Student's Date of Birth (Mo/Day/Year):
Student Diagnosis:	Name of Medication:
Dosage:	Time of Administration:
Route of Administration and Instructions:	
Start Date:	End Date:
Physicians Name (please print):	
Physicians Signature:	Physicians Phone Number:

Parent/Legal Guardian: I hereby give permission for the school nurse to administer the medication as prescribed above.

Parent/Guardian Signature: _____ Date: _____