

ENVIRONMENTAL CHARTER SCHOOL MEDICATION PROCEDURE FORM

It is required by ECS that the attending physician completes the following form for all medications to be given during school hours.

Date: _____

(Student's Name)

Grade: _____

(Medication and Dosage)

(Date: _____ to _____ Date)

(Time Given)

(Condition for which medication is requested)

(Possible side effects)

(Physician's Signature)

(Phone Number)

(Please Print Physician's Name)

(Address)

PHYSICIAN: Please check blocks that apply for inhalers, Epi-pens and other life-saving medications:

- Student is an elementary student and may carry and self-administer medication while on a field trip.
- Student is a secondary student and may carry and self-administer medication on a daily basis.
- Student is a secondary student and may carry and self-administer medication while on a field trip.

PARENT: Please check blocks that apply for inhalers, Epi-pens and other life-saving medications:

- My student is an elementary student and may carry and self-administer medication while on a field trip.
- My student is a secondary student and may carry and self-administer medication on a daily basis.
- My student is a secondary student and may carry and self-administer medication while on a field trip.

The Charter School and/or school employee is relieved of any responsibility for the benefits or consequences of the medication which is physician-prescribed and parent/guardian authorized and that the Charter School has no liability for ensuring that the medication is taken.

(Father/Guardian signature)

(Mother/Guardian signature)

(Date)

The school nurse has standing orders for several over-the-counter medications. Parental permission and a list of these medications are located on the Student Emergency Card which is valid for *one school year* and must be updated every August. *All* other medications *must* be accompanied by an ECS Medication Form. A new form is needed for any changes in medication, dose, route or frequency. This form is also valid for one *school year* and must be updated annually in August.

ECS Medication Policy requires a parent or guardian to bring the medication to school in the original container or prescription bottle. Return this form to your student's School Nurse. No medications are permitted to be transported on the school bus. A second labeled prescription bottle can be obtained from your pharmacist.