



# City of Meriden, Connecticut

DEPARTMENT OF HEALTH & HUMAN SERVICES

## AUTHORIZATION FOR MEDICATION ADMINISTRATION BY SCHOOL, CHILD CARE, AND YOUTH CAMP PERSONNEL

In Connecticut schools, licensed Day Care Centers/Homes, and licensed Youth Camps administering medications to children shall comply with all state requirements regarding the Administration of Medications described in the State Statutes and Regulations. Parents/Guardians requesting medication administration to their child shall provide the school/program with appropriate written authorization(s) and the medication before any medications are administered. Medications must be in the original container labeled with child's name, name of medication, directions for administration, and date of prescription. All medications shall be delivered to the school/program by a parent, guardian, or other responsible adult.

### AUTHORIZED PRESCRIBER'S ORDER

Name of Child/Student \_\_\_\_\_ DOB \_\_\_\_\_

Address \_\_\_\_\_

Medication Name/Generic Name of Drug: \_\_\_\_\_ Controlled Drug?  YES  NO

Condition for which drug is being administered: \_\_\_\_\_

Specific Instructions for Medication Administration \_\_\_\_\_

Dosage \_\_\_\_\_ Method/Route \_\_\_\_\_

Time of Administration \_\_\_\_\_ If PRN, frequency \_\_\_\_\_

Medication shall be administered: Start Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ End Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Relevant side effects of medication \_\_\_\_\_

Plan of management for side effects \_\_\_\_\_

Explain any allergies, reaction to/negative interaction with food or drugs \_\_\_\_\_

Is this medication to be administered on field trips and shortened school days?  YES  NO

Prescriber's Name/Title (type or print) \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Prescriber's Signature \_\_\_\_\_ Date \_\_\_\_\_

### AUTHORIZATION OF PARENT/GUARDIAN

I request that the above medication be administered to my child/student as described and directed above

I hereby request that the medication be administered by school, child care, and youth camp personnel and I give permission for the exchange of information between the prescriber and the school nurse, child care nurse or camp nurse necessary to ensure the safe administration of this medication. I understand that I must supply the school with no more than a 30 school day supply of said medication. I understand that this medication will be destroyed if it is not picked up within one week following termination of the order or one week beyond the close of school.

I have administered at least one dose of the medication to my child/student without adverse effects.

Signature \_\_\_\_\_ Relationship \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

### SELF ADMINISTRATION AND/OR POSSESSION OF MEDICATION AUTHORIZATION /APPROVAL

Self-administration of medication may be authorized by the prescriber (when applicable) and school nurse (when applicable) and must be authorized by parent/guardian in accordance with board policy.

1. Student to self-administer medication specified on this form: \_\_\_\_\_ YES \_\_\_\_\_ NO

2. Student to possess medication specified on this form: \_\_\_\_\_ YES \_\_\_\_\_ NO

Prescriber's Authorization and Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Authorization and Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School Nurse (RN) Approval of self-administration (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_



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### MEDICATION POLICY

Connecticut State Law and Regulations require a licensed Advanced Practice Registered Nurse, Physician's Assistant, Physician, or Dentist's written order and parent or guardian's authorization for a nurse to administer medications, or in her/his absence, the principal or teacher to administer medications. Medications must be in a pharmacy prepared container, which is brought to school by a person over 18 years old and left in school for the duration of the medication. It must be labeled with the name of child, name of drug, strength, dosage, frequency, health care provider's name, and date of original prescription.

The form on the reverse side of this policy should be filled out; top half by the health care provider and the bottom half by the parent or guardian.

Any medication ordered three times a day, twice a day, or once a day is given at home unless specifically ordered by the health care provider to administer during school hours.

When a prescription is taken to the pharmacy and medication is needed for school, let the pharmacist know that you need a school container as well as a container for home. The pharmacist will see that this need is med for the school.

All medications coming into the school is brought in by an adult or guardian, 18 years of age or older, and must be picked up by an adult as well. Children are not allowed to transport or have medication in their possession.

### POLÍTICA DE MEDICACIÓN

La ley y los reglamentos estatales de Connecticut requieren una orden escrita de una enfermera registrada con licencia de práctica avanzada, un asistente médico, un médico o un dentista y la autorización del padre o tutor para que una enfermera administre medicamentos, o en su ausencia, el director o maestro administre medicamentos. Los medicamentos deben estar en un recipiente preparado en la farmacia, que es llevado a la escuela por una persona mayor de 18 años y dejado en la escuela mientras dure el medicamento. Debe estar etiquetado con el nombre del niño, el nombre del medicamento, la concentración, la dosis, la frecuencia, el nombre del proveedor de atención médica y la fecha de la receta original.

El formulario en el reverso de esta política debe completarse; mitad superior por el proveedor de atención médica y la mitad inferior por el padre o tutor.

Cualquier medicamento ordenado tres veces al día, dos veces al día o una vez al día se administra en el hogar, a menos que el proveedor de atención médica lo ordene específicamente para administrar durante el horario escolar.

Cuando se lleva una receta a la farmacia y se necesitan medicamentos para la escuela, infórmele al farmacéutico que necesita un contenedor escolar y un contenedor para el hogar. El farmacéutico verá que esta necesidad es médica para la escuela.

Todos los medicamentos que ingresan a la escuela son traídos por un adulto o tutor, mayor de 18 años, y también deben ser recogidos por un adulto. Los niños no pueden transportar ni tener medicamentos en su poder.