Office of Early Learning and School Readiness

Preschool and School Age Child Care Medication Form

This form meets Ohio Administrative Code. Programs may use this form or build their own including all required information.

*A separate medication form is required for each prescription and non-prescription medication administered.

Student Name:_____ DOB:_____

Student address: _____

School _____ Grade: _____ Class: _____

To Be Completed by the Physician/Dentist:

Medication Name:_____ Dose:_____

Dosage Time/s:_____ Reason for medication:_____

Start date: _____ Stop date: _____

Special Instructions: _____

Potential adverse reactions to be reported:

_____

Physician/Dentist Signature:_____ Date:_____

Physician/Dentist Phone Number:_____ Fax:_____

Parent/Guardian: I give permission for my child to receive this medication at school according to the school district policy and as instructed by my child's physician/dentist.

I agree and am responsible to:

- **Deliver my child's medicine to school in its original container**
- **Ensure prescription medication is labeled by a pharmacist or healthcare provider**
- **Ensure the medication is current within the past 12 months and provide new medication upon expiration**
- **Administer the first dose of any new medication, except in case of emergency**
- **Tell the school as soon as possible if there is a change in the use of my child's medicine**
- **Tell the school if my child gets a new healthcare provider**
- **Have my healthcare provider complete a new medicine form for my child if the medicine or dose changes. I agree for child's healthcare provider to talk with the school or any school staff person about this medicine. No other part of my child's medical health will be discussed.**

Parent/Guardian Signature_____ **Date:** _____

Parent/Guardian Phone: _____ **Emergency Alternate Phone:** _____

Student Name:_____ DOB:_____

Grade: _____ Class: _____

Per ORC 3313.713 B (2) - Designated persons employed by the board are authorized to administer to a student a drug prescribed for the student. Effective July 1, 2011, only employees of the board who are licensed health professionals, or who have completed a drug administration training program conducted by a licensed health professional and considered appropriate by the board, may administer to a student a drug prescribed for the student. Except as otherwise provided by federal law, the board's policy may provide that certain drugs or types of drugs shall not be administered or that no employee shall use certain procedures, such as injection, to administer a drug to a student.

Staff Trained and Authorized to Administer Medication: _____

_____ _____

Drug Administration Training Date _____ Length of time _____

Trained by _____

Date	Time	Dosage Amount	Reason Given/Comments	Signature of Person who Administered