

Falmouth School Department
Health Services

**PHYSICIAN and PARENT Request for Medication Administration
by School Personnel**

Dear Parent/Guardian:

The Falmouth school department discourages the administration of medication during school. However, if the physician decides it is necessary for your child to receive medication during the school day, his/her approval and specific directions must be provided to the school.

- Medication, both prescription and over-the-counter, must be brought to school by a parent/guardian or other designated adult. Prescription medication must be appropriately labeled by a pharmacist or physician.
- Labels must include:

Name of student	Name of medication and Dosage
Time to be given	Physician's name
- To protect your child and other students, medication may not be kept with the student. It must be taken to the Nurse's Office for safekeeping.
- Students are expected to come to the Nurse's Office at the appropriate time to take medication.

Both parent/guardian and physician signatures are required to permit the nurse, or any non-medical person authorized by the school in the event the nurse is not available, to administer the medication. Electronic medical orders and/or faxes are acceptable from providers.

THIS FORM MUST BE COMPLETED AND SIGNED BY A PARENT / LEGAL GUARDIAN FOR ALL MEDICATION TO BE TAKEN IN SCHOOL. THIS FORM EXPIRES AT THE END OF THE SCHOOL YEAR.

Name of student	Date of Birth	Grade

Medication	Dosage	Time to be given at school

Possible Side Effects and Action to be taken

Diagnosis/Reason for taking medication

I have read and agree with [Falmouth Public Schools Medication Policy \(JLCD\)](#)

Physician signature	Date

Parent signature	Date

