

Sutton School Department
Middle/ High School Health Office
Boston Road
Sutton, MA 01590
Tel. (508) 581-1652
Fax: (413)300-5018

Dear Parent or Guardian:

The Massachusetts Board of Registration in Nursing allows for administration of over-the-counter medications in school based on protocols developed by the school nurse, school physician and the school administration. Protocols established by the Sutton School Department include:

- Name of drug (s)
- Dosage and dosage interval
- Indication for administration of the drug
- Potential side effects
- Assessment factors which must be employed prior to drug administration

Students may complain of headache, abdominal upset and other maladies that respond well to non-prescription medications, thus enabling a student to complete the school day in relative comfort. It is advisable that the school nurse assess the students' complaints to determine whether medication will help or if the student's symptoms warrant more attention. Please complete and return the form on the reverse side if you would like over-the-counter medications available to your son or daughter based on the above protocols.

Vanessa Patramanis, BSN, RN

SUTTON SCHOOL DEPARTMENT
PARENTAL PERMISSION FOR ADMINISTRATION OF OVER-THE-COUNTER MEDICATIONS

School Year: 2025-2026

Please check medication (s) noted below that you give permission for your son or daughter to have at school:

- ☐ Acetaminophen regular strength
- ☐ Acetaminophen extra strength
- ☐ Ibuprofen
- ☐ Antacid tablets
- ☐ Pepto - Bismol

Other medication, such as an antihistamine may be given with telephone or written permission from a parent or guardian on an "as needed" basis.

- ☐ Benadryl

If you would like to opt your child out of using hand sanitizer, please contact the health office

Other medications your son or daughter is currently taking:

Has your son or daughter had allergic reactions to medications? If so to what?

Name of Student _____ Grade/Teacher _____

Parent/Guardian Signature _____ Date _____