

FAIRFIELD AREA SCHOOL DISTRICT  
ADMINISTRATIVE PROCEDURE

MEDICATION PROCEDURES

7240

7240.1 Introduction

The Fairfield Area School District recognizes that parents have the primary responsibility for the health of their children. Although it is recommended that medications be given at home, the District recognizes that some medications need to be given during school hours. When medications must be given during school hours, the procedures listed below in the following sections must be followed.

7240.2 Prescription Medications

7240.2a Medications must be delivered directly to the school nurse, principal, or designee as soon as they are brought to school.

7240.2b Medications should be in an original pharmacy bottle labeled with the student's name, name of medication, dosage, and frequency of dosage. A note from the parent with permission to medicate and instructions for dosage and time of administration should accompany the bottle.

7240.2c A medication log will be kept by the nurse documenting all medications given during school hours.

7240.2d All medications will be kept in a locked cabinet in the health room.

7240.2e The school nurse (or his/her designee in his/her absence) will administer all medications.

7240.3 Non-Prescription Medications

7240.3a Medications in appropriate containers must be delivered to the school nurse, principal, or designee as soon as they are brought to school.

7240.3b A note from the parent must accompany the medication permitting its administration and indicating the student's name, name of medication, dosage, and time of administration (see accompanying permission form).

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- 7240.3c A medication log will be kept by the nurse documenting all medications given during school hours.
- 7240.3d All medications will be kept in a locked cabinet in the health room.
- 7240.3e The school nurse (or his/her designee in his/her absence) will administer all medications.
- 7240.3f Students will be responsible for reporting to the health room at the appropriate times to receive their medication.

7240.4 Medications Kept by Students

- 7240.4a In certain conditions such as asthma, diabetes, etc., it may be advisable for students to carry their medications with them. These medications should be registered with the school nurse who will use his/her discretion in granting permission for students to do so.

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PRESCRIPTION MEDICATION  
PERMISSION FORM

Dear Parent/Guardian:

It is the policy of the Fairfield Area School District to administer medications only during school hours when absolutely necessary. In order to administer medications, it is a requirement that the following consent form be signed. No medications will be given without signed consent.

Medication and consent form must be brought to the school nurse at the beginning of the school day. Medications must be sent in a pharmacy bottle with the pharmacy label stating child's name, name of medication, dosage and how often medication is to be given. Please do not send unlabeled bottles to school. If you do medications will not be given. The student is responsible for coming to the health room for medications. Any change in dosage of medication must be reported to the School Nurse immediately.

\_\_\_\_\_  
School Nurse

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I give my permission for the School Nurse or his/her designee to administer to my child \_\_\_\_\_ the prescribed medication according to the directions of the physician on the bottle's label.

\_\_\_\_\_  
(Name of medication)

\_\_\_\_\_  
Dosage

Times medication to be given \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

ADMINISTRATIVE PROCEDURE

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NON-PRESCRIPTION MEDICATION  
PERMISSION FORM

Dear Parent/Guardian:

It is the policy of the Fairfield Area School District to administer medications only during school hours when absolutely necessary. In order to administer medications, it is a requirement that the following consent form be signed. No medications will be given without signed consent.

Medication and consent form must be brought to the school nurse at the beginning of the day. Medications must be sent in a suitable container accompanied by a note stating child's name, name of medication, dosage and how often medication is to be given. The student is responsible for coming to the health room for medications. Any change in dosage of medication must be reported to the School Nurse immediately.

\_\_\_\_\_  
School Nurse

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I give my permission for the School Nurse or his/her designee to administer to my child \_\_\_\_\_ the non-prescribed medication according to the directions of the physician on the bottle's label.

\_\_\_\_\_  
(Name of medication)                      Dosage

Times medication to be given \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date