



ST AUGUSTINE'S COLLEGE

PERMISSION TO ADMINISTER MEDICATION

BOARDING STUDENTS

Student name

Year Level

Date of Birth

Residence

PRESCRIPTION MEDICATION TO BE ADMINISTERED BY COLLEGE BOARDING STAFF

I hereby request that the College/Boarding staff administer the following medication to my child at school/boarding or during school/boarding related activities, as specified below.

NOTE: All medications must be correctly labelled by a pharmacist.

NAME OF MEDICATION	DOSAGE (EG ONE TABLET)	STRENGTH (EG 10MGS)	INDICATIONS FOR USE (EG INSTRUCTIONS FOR WHEN AND HOW THIS MEDICATION IS TO BE ADMINISTERED)

Additional information

I give permission for chemist requirements to be obtained through the pharmacy that supplies the College. I agree that these costs will be passed to me for payment. If hospitalisation is required, in the first instance students will be taken to the Cairns Hospital. If private treatment or ongoing treatment at a private medical specialist is preferred, I agree that this will be at my expense and directly payable by me to the private provider.

If Yes, please tick

Parent/Carer Name

Parent/Carer Signature

Telephone number

Date

PRESCRIPTION MEDICINES TO BE RETURNED WITH COMPLETED FORM TO COLLEGE NURSE
SEE PAGE 2 FOR OVER THE COUNTER MEDICATION PERMISSIONS TO BE COMPLETED

PERMISSION TO ADMINISTER MEDICATION

OVER THE COUNTER MEDICATION

TO BE ADMINISTERED BY COLLEGE BOARDING STAFF

I authorise the College/Boarding staff to administer the selected over-the-counter medication to my child during school, boarding, or related activities as deemed necessary by the College Nurse, Doctor or other trained staff member. Please tick those you consent to:

MEDICATION CATEGORY	INSTRUCTIONS	EXAMPLE (INC CHEMIST/GENERIC BRANDS)	CONSENT
Analgesics		Panadol, Paracetamol, Dymadon	
Anti-Inflammatory (NSAIDs)	NB: Precautions for some conditions noted	Nurofen, Raffin, Naproxen, Ponstan	
Antiviral Cream		Zovirax, Chemist brand cold sore cream	
Multi Vitamins	Need Doctor's script or pharmacy label for Iron/ferro tab	Vitamin A, B, C, D, E, Multi etc	
Antihistamine (non-sedating)	NB: Polaramine/Phenergan not used without script	Zyrtec, Claratyne, Aeries	
Cough Suppressants	Dry or Chesty syrup for cough	Bisolvan, Durotuss, Dimetapp	
Decongestants (cold & flu)	NB: no longer than 48 hours use	Codral, Sudafed, Durotuss, Demazin	
Antiseptics, Analgesics	Soothing sore throat	Strepsils Plus, Difflam, Butter Menthol, Soothers	
Topical Antibiotic/Antifungal	As per Doctor or RN instruction only	Bactroban, Clotrimoxazole antifungal cream	
Topical Creams & Lotions		Deep Heat, Itch Eze, DermAid 0.5%, Ice Gel, Calamine lotion, Aloe Vera, Vicks Rub, Bonjella	
Anticholinergic	Motion sickness	Ginger tablets, Travel Calm, Kwells	
Laxatives/Stool Softeners	For constipation – as per Doctor or RN instruction only	Movicol, Osmolax, Actilax, Coloxyl	
Adsorbents, Antimotility	Anti-diarrhoea	Lomotil, Imodium, Gastro-Stop	
Eye-drops – Lubrication and Antibiotic	NB: Chlorsig – as per DR or RN instruction only	Hyloforte, Celluvisc, Chlorsig, Murine, Refresh	
Ear/Otic drops	For ear pain or wax softening only - s per Doctor or RN instruction	Aqua Ear, Auralgan	
Urinary Alkaliser	Nurse directed	Ural, Cystitis relief	
Gastrointestinal Antacids, Anti-Gas	NB: precautions for GI conditions	De-gas, Mylanta, Gaviscon	
First Aid/Miscellaneous	Nurse directed	Wound wash (chlorhexidine, betadine), Wart Off, Tick Off, Head lice treatment, Combantrin (worms)	

NOTE: The Health and Wellbeing Centre has a supply of Over The Counter (OTC) medicines which do not require a prescription. These OTC medicines can be administered to students with consent, unless noted otherwise (see instruction column). This OTC list is compiled and reviewed annually by the College Health Team, Director of Boarding and College Doctor.

Parent/Carer Name

Date

Parent/Carer Signature

PRESCRIPTION MEDICINES TO BE RETURNED WITH COMPLETED FORM TO COLLEGE NURSE