

ADMINISTRATION OF MEDICATION GUIDELINES

The administering of medication is primarily the responsibility of parents. Although we encourage it, we realise that it isn't always possible for parents to personally administer the medication at school. These guidelines will assist teachers and parents the secure and accurate administration of medication to students whilst at school.

Medication will only be administered when:

The parent provides written and signed instructions. Administration of Medication forms are available from the office. It is preferable if the parent hands the medication directly to the teacher or the office.

Instructions should include:

- 1 Name of child
- 2 Teacher and class
- 3 Details of medication (name etc.)
- 4 Dosage required
- 5 Instructions for administering of medication
- 6 Contact phone number
- 7 Signature
- Medication should be sent in its original container with the written instructions still clearly visible.
- If measuring cup \ spoon is required, this should be provided by the parent and labeled with the child's name.
- There should only be need to administer medication once a day.
- Where asthma medication is being self-administered, the parent must inform the teacher in writing at the beginning of each school year.

PROCEDURE

- 1 Medication is to be given to class teacher with signed instructions.
- 2 Medication is to be stored in the First Aid Room or refrigerator if necessary.
- 3 After medication has been administered, teacher is to record the date and time medication was administered and sign the entry.
- 4 Parent is to collect medication from the office at the end of the day. If this is not possible, parent must request in writing that such medication is to be given to the child to be brought home.

INSTRUCTIONS FOR THE ADMINISTRATION OF MEDICATION

STUDENT NAME:
CLASS:
MEDICATION:
DOSAGE REQUIRED:
INSTRUCTIONS:
CONTACT PHONE NUMBER:
SIGNATURE:

RECORD OF ADMINISTRATION

DATE	TIME	QTY / Amount	SIGNATURE 1	SIGNATURE 2

RECORD OF ADMINISTRATION

DATE	TIME	SIGNATURE 1	SIGNATURE 2
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