



Seattle Christian School

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Medication Authorization Form

Student Name: _____ Date of Birth: _____ Grade Level: _____
Last First MI
Parent Name: _____

This Portion To Be Completed By The Licensed Health Care Provider

<u>Name of Medication</u>	<u>Dosage</u>	<u>Method of Administration</u>	<u>Time of Day To Be Taken</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Reason for medication to be given during school hours: _____

Anticipated action: _____

Possible side effects of medication: _____

Emergency procedure in case of serious side effects: _____

I request and authorize that the above named student be administered the above identified medication in accordance with the instructions indicated above for the period commencing with the _____ day of _____, 20____ through the _____ day of _____, 20____ as there exists a valid health reason which makes administration of the medication advisable during school hours or during such time that the student is under the supervision of school officials. Such medication may be administered by medically untrained personnel.

Date of Signature

Licensed Health Care Provider's Signature

Telephone Number

Name

Fax Number

Address

This Portion To Be Completed By The Parent/Guardian

I certify that I am the parent, legal guardian, or other person in legal control of the above identified student and request and authorize the school to administer the above identified medication to the above identified student in accordance with the prescription or doctors' instructions for the period commencing with the _____ day of _____, 20____ through the _____ day of _____, 20____ (not to exceed one school year).

Medication will be supplied to the school in the original container.

Parent/Guardian Signature

Date of signature

Telephone Number – (home)

(cell)

(work)

(Medication Policy on the reverse side)

Medication Policy and Procedures

(as referenced in the SCS Student Handbook)

Washington state law permits school staff to administer medication only in limited situations. When possible, the parents and LHCP are urged to design a schedule for giving medication outside school hours. Medication is defined to mean all drugs, whether prescription or "over the counter."

Prior to administration of any medication, the following requirements must be met:

1. A medication authorization form must be on file giving name of medication, dosage, time, dates to be given, student name, parent/guardian signature, and date.
2. The medication authorization form on file must be signed by a Licensed Health Care Provider (LHCP) with prescription authority for each medication indicating a valid health reason which makes administration of such medication advisable during school hours or when a student is under the supervision of school officials. The LHCP must also indicate name of medication, dosage, time, and dates to be given, possible side effects with LHCP signature. This request is valid for a period not to exceed one year.
3. Medication guidelines are the same for any student who may require emergency medication or injections while at school such as with asthma or severe allergies.
4. All medication must be in the originally labeled container and be labeled with student's name.
5. Medication should be brought to school by a parent or legal guardian.
6. In grades 7-12, where the parent, LHCP and secondary office staff believe it is in the best interest of the student that he or she carry the medication, the student shall carry written permission from the parent, indicating the name and dosage of the medication, plus dates and time to be give. Only one day's dosage (in originally labeled container), as well as parent's written permission, shall be carried by the student. Prior approval **must** be given and noted by the secondary office staff. *There will be no self-administration of medications by students in grades K-6.*
7. If requirements 1, 2, 3 and 4 are not met and parents want the child to have the medication, the parent may come to school and administer it.
8. In most cases, it will be the child's responsibility to come to the office at the appropriate time for medication. The parent may put a note in the lunch box to remind the child to take the medication.
9. Medication administered by routes other than oral, for example: ointment, eye drops, nasal inhalers, suppositories, or non-emergency injections, may not be administered by school staff.

(Authorization Form on the reverse side)