OTC MED AUTHORIZATION

PARENT CONSENT

Name of Student: _____ Date of Birth: _____ Grade/Teacher: _____

List any known allergies or sensitivities that your child has: _____
_____

School personnel must have signed consent (or online enrollment consent) in order to administer these over-the-counter medications. Generic equivalent medications maintained in the health rooms will be used in place of more expensive brand-name items. The school nurse will administer the approved medications as deemed necessary using his/her nursing judgment. Additionally, the school nurse will attempt to contact you upon administration of medication to your son/daughter.

Over-the-counter medications will be administered sparingly when indicated to make your child more comfortable and able to remain at school. For example, the medication may be used for dental pain, mild headaches, orthopedic pain related to recent injury, or in the case of diphenhydramine for symptoms of an acute allergic reaction. You may still need to be contacted for further care of your child. Also, if your child has a fever (100.0 F or higher), district policy requires that your child go home from school and not return until fever-free for 24 hours without aid of medication.

Check all desired medication(s) for your child. Dosage will be according to weight.

- □ Acetaminophen (generic for Tylenol®)
- □ Ibuprofen (generic for Advil®)
- □ Diphenhydramine (generic for Benadryl®)
- □ Cetirizine (generic for Zyrtec®)
- □ Calcium Carbonate Antacid (generic for Tums®)
- □ Cough Drop/Lozenge
- □ Eye Drops (Saline)
- □ Topical Ointment/Cream (e.g., Vaseline, Calamine Lotion, 1% Hydrocortisone etc.)

I understand that the school employee who administers these medications according to proper dosages shall not be held liable for any adverse reactions to the medication administered. I hereby give my permission for my son/daughter to receive the above medication(s) checked on this form as deemed necessary by the school nurse.

_____	_____	_____
Parent Signature	Parent (Printed Name)	Today's Date