

**GATEWAY SCHOOL DISTRICT  
MEDICINE PERMISSION FORM**

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_ Homeroom \_\_\_\_\_

Name of Medicine \_\_\_\_\_ Diagnosis \_\_\_\_\_

Name of Prescribing Physician \_\_\_\_\_

Dosage \_\_\_\_\_ at (time/s) \_\_\_\_\_ for (number) \_\_\_\_\_ days

**I will take full responsibility for the prescribed medication which is to be taken during school hours.**

**Signature of Parent or Guardian** \_\_\_\_\_

**Date** \_\_\_\_\_ **Home Phone** \_\_\_\_\_ **Work Phone** \_\_\_\_\_

*All prescription medicine must be in an appropriate pharmacy container, labeled with the name of the student, the amount to be taken and the time to be taken.*

*All over-the-counter medicine must be in the manufacturer's original container and labeled by the parent with the child's name, dosage to be taken and the time to be taken.*

**ADMINISTERING MEDICINES TO STUDENTS**

The Gateway Board of School Directors recognizes that when students' health needs make it necessary for medication to be taken during school hours, sound medical practice and State Law indicate certain procedures must be followed.

**Only essential prescribed medicines will be given at school.** The parent or guardian will assume full responsibility for any medication sent to school. Pre-planning will permit most medications to be administered at home. Medications must be administered by a certified nurse, however, the administration of over-the-counter medications is governed by state law, which forbids a school nurse to administer an medication without a physician's or dentist's written order. In the absence of the nurse, medication may be administered by the building principal or his/her designee.

**Procedures for the Administration of Medications:**

**A. All Medications:**

1. A physician's or dentist's written order must accompany each medication, including over-the-counter medication, along with a signed Gateway School District Medicine Permission Form.
2. Prescriptions must be packaged according to current pharmacy standards and in properly labeled pharmacy containers.
3. Over-the-counter medications must be in the manufacturer's original container and be labeled by the parent with the child's name, dosage to be taken and the time to be taken.
4. All medications are to be kept in a locked cabinet.
5. Medications not in compliance with the above policy cannot be given and will be returned to the parents.

**B. Injectable Medications:**

1. Medications to be given by injection will be given only by the school nurse, or by the child if he/she has been properly instructed.
2. Injectable medications must comply with the policy issued for oral medications.
3. EpiPen usage will be dealt with on an individual basis.