



Authorization for Administration of Medication at School

Student's Last Name First Name Date Of Birth School/Program

In accordance with California Education Code section 49423, all students receiving medication at school require a medication authorization which must be completed by a California licensed physician or other healthcare provider who has the authority to prescribe medication in the state of California. The information requested on this form is necessary to comply with the law and to insure adequate protection of the students. This form is valid for school year to .

PARENT SECTION

I, the undersigned as legal parent/guardian (student's name) authorize the school staff designated by the school site principal, to administer the following listed medication(s) to my child as prescribed on this authorization in accordance with California law. I also authorize, as needed, the sharing of information related to my child's health on matters related to this medication, between the school nurse (or designee) and the health care provider listed below. I will comply with the procedures listed on the back of this form related to administering medication at school.

Date Parent/Guardian Signature Daytime Phone Number

PROVIDER SECTION: TO BE COMPLETED BY PHYSICIAN

Diagnosis/Condition

I hereby instruct a designated school staff member to assist the above student in taking:

Table with 5 columns: Medication, Dose, Method of Administration, Time to be given, Frequency. Two rows of medication entries.

Discontinue Medication # 1 (date) Discontinue Medication # 2 (date)

Physician's Name (Printed) License # Physician's Signature



The procedure covering prescription and non-prescription medication will be executed under the following conditions:

1. Only medications prescribed by the student's health care provider listed on this form may be brought to school. Written parent permission is also required.
2. The medication shall be taken directly by the student in accordance with instructions from the provider as listed on this authorization.
3. Medication brought to school will be given to the student according to the provisions listed on this form. The prescription or manufacturer's container must be clearly labeled with:
 - The name of the student
 - The name of the prescribing provider
 - The pharmacy who dispensed the medication or the manufacturer
 - The strength of the medications and the amount to be given (dose)
 - The method of administration (oral, inhaled, topical, etc.)
 - The specific time and/or specific situations in which the medication is given
 - Parents may want to ask the pharmacist for "school packaging" – a specific container labeled just for the school time dose
4. Parents/guardians must provide all materials or necessary equipment for medication administration.
5. An adult must bring the medication to the school and pick up any outdated or unused medication.
6. All medications will be kept in a secure place. Any special instructions for storage or security measures must be written by the provider and given to school personnel. Students carrying and administering their own medications must have prescriber and parent/guardian written authorization.
7. A new medication authorization form must be completed for any change in dose, time, or method. It will be valid for the current year or until a discontinuing date listed by the prescribing individual.

References: California Education Code Section: 49423 Medication at School; 49480 Continuing Medication Business and Professions Code: 2725 Verbal Orders; Definition of a Physician; Definition of a lawful prescription; 4051 Restrictions on furnishing medications without prescription.

Ko/2017