

Cushing ISD Medication Distribution Guidelines

Note: Medications to be given to a student on a routine or as needed basis must be provided to the school in its original labeled container by the parent/guardian.

Prescription medication **MUST** be labeled with the student's name, date, dosage, expiration date, directions for use and prescribing physician.

Over the counter (OTC) medication must be provided by the parent, in the original container with expiration date and correct dosages appropriate for age and size of student indicated. OTC medication will not be administered more than three days in a row without a doctor's order.

****** The only exception to the above stated is as follows: Cushing ISD staff can provide first aid treatments and medications as indicated per W E Furniss II MD and **WILL NOT** provide any other medications **UNLESS** provided by the parent/guardian.

Students may not carry medication on their person at school. It is the parent's responsibility to pick up ALL remaining medication on or before the last day of school. **ALL MEDICATION REMAINING IN THE SCHOOL WILL BE DESTROYED AFTER THE LAST DAY OF CLASS.**

Please take the time to read and answer each of the questions below. Parental/Guardian written consent and details for student medication administration must be on file in the nurse's office.

Student Name:		Grade:
Medication:		Dosage:
Route: (oral, topical, eye, ear, nasal, injection, etc)		Time to be given:
Start Date:	End Date:	Expiration Date:
Condition for which the medication is being given:		
Does the student have any food and/or drug allergies? <input type="checkbox"/> NO <input type="checkbox"/> YES (If yes, please explain)		
Parent/Guardian Request:		

Parent/guardian signature

Date

PLEASE DISCONTINUE THIS MEDICATION

Parent/guardian signature

Date

Witness signature

Date