

Student Name \_\_\_\_\_ Form C

**Rochester Community Schools**

**Parent/Guardian Permission for Over-The-Counter (OTC) Medication**

*Only one medication per form*

Name \_\_\_\_\_ Grade \_\_\_\_\_

School \_\_\_\_\_ Teacher \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Weight (if required for dose) \_\_\_\_\_

Medication name \_\_\_\_\_ Exact Dose \_\_\_\_\_

Condition for use (such as headache) \_\_\_\_\_

YES  NO Medicine to be taken with food?

Other directions \_\_\_\_\_

YES  NO My child may determine when this OTC medication is needed

YES  NO My child would know to wait 4-6 hours before requesting this OTC if taken at home before school

If answering "NO" to either question above, staff will call you before giving.

YES  NO Parent/Guardian to be notified with every use of this medication

**Other times to call or special instructions-**

\_\_\_\_\_

***OTC medication without a doctor's written permission will have limited use at school***

***SEE PAGE 2 FOR RULES***

A licensed prescriber can order OTC medication on **FORM A** for prescribed medication if you want an OTC medication given more frequently or on a regular schedule. You also have the option to come to school and give your child medication as desired.

**Parental Permission**

**I have read the guidelines on page two of this form for the administration of over-the-counter medication at school. I give my permission for the above named medication (supplied by me) to be given by school staff as directed on this form.**

Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

*Signature*

Phone Number \_\_\_\_\_ Alternative number \_\_\_\_\_

**Guidelines for parents and school staff regarding over-the-counter (OTC) medication at school without an order from a physician/licensed prescriber:**

- All medication must be **in the original container** and an unopened container is recommended.
- **Write the exact dose** (amount of medication to be given, not a range) on page one of this form.
- **Write your child's name on the medicine bottle** or packaging without covering the label.
- **Only one medication per form.** You will need a separate form for every OTC medication.
- **Write the exact name of the medication** to be given on page one of this form.
- **Write the condition** for use (such as, headache or menstrual cramps.)
- **Aspirin will not be given** to students without a doctor's order on "FORM A" due to its association with Rye's Syndrome.
- **Stomach pain** will not be treated with acetaminophen, ibuprofen or naproxen without a medical order on "Form A" due to lack of indication. Menstrual cramps are not considered stomach pain.
- **No OTC medication will be given frequently or for a prolonged period.** If your child is experiencing the need for frequent or regular administration of this OTC medication at school, you will be notified. To continue giving this OTC a physician or licensed prescriber's order will be required. This is to help insure that a serious condition is not being ignored or a more appropriate treatment is not being overlooked.
- **If your child is sick** it is not appropriate to treat the symptoms at school. Medication may help symptoms briefly or reduce a fever, but he or she **is still contagious** and should be home.
- **Cough drops** are more like candy than medicine and have the potential to be a choking hazard. If your child's cough has become an issue, a medical professional should be consulted.
- **OTC Benadryl or other antihistamines** ordered for a **potentially life threatening allergy** (anaphylaxis) must be ordered as part of the **Severe Allergy Medical Action Plan (MAP) and signed by the physician.**
- OTC Benadryl or other antihistamines for **mild food allergies** must be ordered by a licensed prescriber and can be done on **FORM A** without completing a MAP for severe allergy.
- **Parent/guardian may order OTC antihistamines only** for **mild allergies** that are **not caused by food**, such as hay fever.
- **For the purpose of this form,** Over the Counter (OTC) medication includes vitamins and homeopathic remedies.

**NOTE:**

- The reverse side of this form must be completed and signed by a parent/guardian.
- The very first dose of this medication type may not be given at school since it is not know how your child may react to the medicine.
- Unused medication may be picked up by a parent/guardian anytime before the end of the school year. Medication remaining after the last day of school will be properly discarded.

*Parents/guardians have the right to come to school and give medication to their child without an order form on file. However, all sick children should be home to help protect others.*

If you have questions regarding the guidelines above, please feel free to contact the school.