



Student Medication Request

Where possible, student medication should be administered by the student or be administered by the parent/carer at home in times other than school hours. As this is not possible in all instances, before the Principal approves school staff to administer prescribed medication to students, the following requirements must be met.

1. The doctor prescribing the medication is to be aware that school staff will administer or supervise the administering of medication to a student.
2. The doctor is to provide in writing any additional information to staff regarding special requirements that may exist for the administration of the medication.
3. The doctor should provide in writing all information of any side effects of medication and consequences of providing medication when it is not necessary.

Prescribed student medication is to be presented to Administration Staff on arrival at school and must be in the original packaging clearly showing the name of the student, the name of the medication, the dosage and frequency. All medications are kept in the Sick Bay or Office at Orana Catholic Primary School. No medications are allowed to be kept in children's school bags during the school day.

Parent/Carer Permission:

I _____ being the parent/carer of
(Parent/Carer's full name)

_____ request that a school staff member
(Student's full name)

administer the following medication as prescribed by Dr _____

for the purpose of treating _____
(Name of condition being treated.)

Name of medication: _____

Dosage: _____ Frequency: _____
(During school hours)

Time to be taken: _____

Tablets: Yes No Liquid: Yes No

Number of tablets provided: _____

Received by: _____ Date: _____
(Staff member's name and signature)

Additional comments: _____

Signature: _____ Date: _____
(Parent/Carer's signature)

