

School District of Black River Falls – Red Creek Elementary

Permission to give Over-the-Counter medications

STUDENT INFORMATION (TO BE FILLED OUT BY PARENT/GUARDIAN)

Student Name (last, first) _____ DOB _____ Grade _____

Parent/ Guardian's Name _____ Phone _____

Emergency contact's Name _____ Phone _____

Does your child have allergies? Yes ___ No ___ If yes, please be specific on the back.

Does your child have health problems? Yes ___ No ___ If yes please be specific on the back.

Does your child take medications at home daily that would be in his/her system during the day? Yes ___ No ___ List _____

Other information the nurse should know in an emergency? _____

Do you give the Black River Falls School District/Nurse permission to give your child the following medications **per manufacturer's instructions**? (Circle Yes or No for the following over-the Counter medications you wish the school nurse and designee to follow.)

Yes No **Acetaminophen 160mg 2-4 tabs** as needed every 4-6 hours for pain/discomfort.

Yes No **Ibuprofen 100mg 1-3 tabs** as needed every 6-8 hours for pain/discomfort.

Yes No **Topical ointments (hydrocortisone, triple antibiotic, 1st Aid cream, etc).**

Yes No **Cough drops 1 cough drop** as needed for cough or sore throat. Maximum of 3 per day.

Other over-the-counter medication (to be supplied by parent):

Medication _____ **Dose** _____ **Frequency** _____

Reason _____

Parent/Guardian Signature _____ Date _____

* To give any prescription medications we need the Prescription Medication Form completed by physician and parent and medicine supplied in a properly labeled container. Any over the counter medications requested to be given in doses that exceed the above dosing will require a Prescription Medication Form and a physician's signature.

** All medications, over the counter or prescription, need to be brought in by an adult and NOT sent with the student. Only students with severe medical conditions who have "consent to carry" forms filled out by a physician are allowed to carry any type of medication in school.