

HARVEST CHRISTIAN SCHOOL
Administration of Prescribed Medication for Pupil
(Education Code Section 49423)

TO: _____
(Principal's Name)

1. Physician's Statement

_____ is under my professional care
and is on the following medication:

Medication: _____ Current Dosage: _____

Method medication is taken _____

Date medication to be started _____ Date to be ended _____

Time schedule _____

Precautions, if any _____

I recommend that the school nurse or other designated school personnel assist in the
administering of the prescribed medication during school hours.

Date: _____ Signature of Physician: _____

2. Parent(s) or Guardian Statement:

As the parent(s) or guardian of _____
(Student's Name)

(we) (I) request Harvest Christian School assist in carrying out _____
(Physician's Name)
instructions in the administering of the prescribed medication during the school day.

Date: _____ Signature of Parent/Guardian: _____

**NO MEDICATION WILL BE ADMINISTERED WITHOUT THE SIGNATURES OF
THE PHYSICIAN AND PARENT/GUARDIAN**

(Please return this form to the school office)

Note: When possible medication should be administered outside of the school day. The school should be requested to assist the child with medication only in exceptional cases when the child's health condition requires medication during the hours school is in session.

Dear Parent/Guardian:

In order to administer medication to your child at school the following criteria must be met:

1. The medication must be in a labeled prescription bottle from a U.S. pharmacy with the child's name, name of medication, dosage method to be given, and current date.
2. Per Education Code Section 49423:
 - a. "A written statement from such physician detailing the method, amount, and time schedules by which medication is to be taken."
 - b. "A written statement from the parent or guardian of the pupil indicating the desire that the school assist the pupil in matters set forth in the physician's statement."
3. Medication must be brought to school by the parent or guardian. Refills for continuing medication must be transported to the school by the parent or parent designee.
4. No over-the-counter medications will be administered at school without written permission from the physician and the parent (see 2.a,b), (example: Tylenol, cold medication). All over the counter medications need to be submitted new and unopened in a sealed container to the school office.
5. It will be the responsibility of the child to come to the school office to receive the medication.
6. Students on continuing medication must have new forms completed at the beginning of the school year.
7. The above procedure must also be followed if there is a change in dosage of the medication.
8. Come to the school office to pick up remaining medication on the last day of the school year (It cannot be sent home with your child). Any unclaimed medication will be discarded after the expiration date.

When the above criteria has been met, we will be able to assist in administering your child's medication at school.

Sincerely,
Administrative Team
Harvest Christian School