



Palmetto Scholars Academy
Medication/ Procedure Doctor's Order
OTC Permission

TO BE COMPLETED BY LEGAL PRESCRIBER

Name of Student: _____ Grade _____

Date of Birth: _____

List any known drug allergies or other other allergies: _____

Doctor's orders for medications or procedures to be administered or performed at school:

Medication/ Procedure	Dosage	Comments/ Special Instructions
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

 Legal Prescriber, print name/ title

 Signature of Legal Prescriber

 Date

Office Address: _____

Phone#: _____
 Fax#: _____

TO BE COMPLETED BY PARENT/ LEGAL GUARDIAN

I consent for the Palmetto Scholars Academy nurse (or designated personnel in his/her absence) to administer the OTC medication as indicated below.

Acetaminophen Ibuprofen
 Hydrocortisone Cream Anti-fungal Cream Antibiotic Ointment

I have read and understand the PSA Medication and Medical Procedure Information & Policy and give permission for my child to receive the above medication or procedure as directed. The nurse may share health information with those with a legitimate need to know. This order is valid through the end of the school year and new doctor's orders are required at the start of each school year.

 Parent/ Legal Guardian printed name

 Signature of Parent/ Legal Guardian

 Date

Preferred Telephone#: _____

Work Telephone#: _____



Medication and Medical Procedure Information & Policy

Medications:

1. Long-term prescription and non-prescription (over 2 weeks) require receipt of the completed Medication Procedure Doctor's Orders form signed by the parent/legal guardian and the child's legal prescriber. All medication must be provided in the properly labeled original container.
2. Short-term prescription medications (2 weeks or less) require only written permission from the parent/legal guardian and the original properly labeled prescription container.
3. Only PSA personnel may administer over-the-counter medications to students that have been approved by submitting the Medication/ Procedure Doctor's Order form. Students may not administer their own medication with the exception of those approved with the Self-Medicating and/or Self-Monitoring form.
4. Any prescription medication or medical procedure (ex: blood sugar check) to be administered at school or school related activities must be accompanied by written orders from a health care practitioner. Limited over-the-counter medications may be administered by the school RN,LPN or designated personnel with parent consent. All information is confidential for the school nurse or administration and may be shared on need to know basis for student safety.

Parent Responsibilities:

1. Supply PSA Medication/ Procedure Doctor's Orders form along with the medication in the original labeled prescription container and/or proper equipment to the nurse.
2. Inform the school of any changes in the student's health condition, medical procedures, or medications.
3. Update all PSA forms annually.
4. Pick up any unused medication or medical supplies within one week of discontinuation or last day for students, whichever comes first. If not picked up, medications will be disposed of.

School Responsibilities:

1. Receive and review completed Medication/ Procedure Doctor's Orders form and medications.
2. Properly train designated staff member, volunteer, registered nurse or physician to assist with administration of medication or performance of medical procedure according to PSA policy.
3. Communicate with parents any problems or issues related to administering medication or medical procedures.

Some students with special health care needs may self-administer and/or monitor, provided the following requirements are met:

1. Medication/ Procedure Doctor's Order form is completed and signed by legal prescriber and parent.
2. Documentation has been received from the student's healthcare provider stating that the student has been trained and is competent to self-medicate and/or self monitor.
3. Medication is provided in an appropriately labeled prescription container.
4. The school has determined that the student's self administration/ monitoring will not jeopardize the safety of the student or others.
5. The parent/legal guardian acknowledges that the school/ school district shall incur no liability as a result of any injury arising from the student self-medicating and/or monitoring. The parent shall indemnify and hold harmless the district and it's employees and agents against any claims arising out of the student self-medicating and/or monitoring.