

SHERMAN INDEPENDENT SCHOOL DISTRICT
REQUEST FOR ADMINISTRATION OF MEDICATION IN SCHOOL

In accordance with the Texas Education Code, SISD has adopted the following policy concerning the administration of medication to students by school employees. No school employee shall be authorized to administer a medication to a student unless the following conditions have been met:

1. **All medication must be in its original container and properly labeled with the student's full name. A properly labeled prescription medication is one with a pharmacy label stating the student's name, name of medication, dosage to be administered, doctor's name and date prescription filled.** Sample medications must be accompanied by a Doctors' written order. If not, it will be sent home with the student. Medications must be age appropriate. **If there is a medication discrepancy that might be injurious to the student, the nurse has the responsibility to question the discrepancy or refuse to give the medication.** Aspirin is an important example. Aspirin usage by children and adolescents has been associated with the rare, but often fatal REYES SYNDROME disorder.

**The nurse may not administer aspirin-containing products to students
18 years of age or younger without prior written physician and parent consent.**

2. Special agents such as herbs, vitamins, amino acids and homeopathic remedies will require the following before they can be administered: Physician ordered, written parent consent and specific instructions for use.
3. Supplements must be in the original container that is up-to-date and age-appropriate. **SPECIAL NOTE:** The school nurse will not be obligated to administer any non-FDA approved substance for which she has no training, knowledge or familiarity as in accordance with the Texas Board of Nurse Examiner regulations.
4. Non-prescription medication may not be kept at school longer than **five school days** unless a written statement by The physician is received stating it is to be used through the school year for a specific condition.
5. School personnel will not be responsible for sending medication home on a daily basis. Only the school nurse or Principal's designee(s) shall administer medications.
6. Parents assume all risk for medication sent to school. It is the parent or legal guardian's responsibility to provide a signed request to administer medication to the student and notify school personnel about the medication. A Student may not transport any medication prescribed or OTC on District Transportation. Exception: Self-Carry Dr. Order must be on file.
7. Medication used at school is to be kept in the clinic. This includes non-prescription medication, such as cough drops, throat spray, and Tylenol.

AUTHORIZATION TO RELEASE INFORMATION: I understand my signature gives the physician my consent to release information to SISD personnel and releases the district from liability due to any allergic reaction or side effects.

Teacher:_____ Grade:_____ Drug Allergies:_____

Student's Full Name:_____

Medication Name:_____ Doctor:_____

Dosage (mg.):_____ Number to be given:_____

Time to be Given:_____

Reason Medication is Given:_____

Pharmacy:_____ Rx # _____

Date Brought to School _____ Date to Send Home _____

Parent Signature:_____