

**Pulaski County School System**  
**Authorization of Medication Administration**  
*(Long Term Medications)*

Medications that will be administered every school day or as needed throughout the school year must have an order from the prescribing physician. These medications are long-term medications. These medications must be delivered to the school clinic and an **Authorization for Administration of Medications** form must be completed and signed by a parent/ guardian.

Medication that needs to be given daily or two/three times a day should not be given at school unless the physician specifically states a time during the school day at which it is to be given. A medication which is to be given three times daily may be given before the child leaves for school, when he/she gets home, and at bedtime.

If medication and/or dosages change, a new form must be filled out before the school regimen can be changed.

**All medications should be brought to school in its original container. Medications brought in baggies or other unmarked containers will not be given. Prescription medication should be in the pharmacy container labeled with the child's name, date, name of medication, name of the prescribing physician, time(s) the medication is to be given, and name of the pharmacy filling the prescription. A request can be made through the pharmacist for two-labeled prescription bottles so that one bottle may be kept at home and one at school.**

Student \_\_\_\_\_ Homeroom \_\_\_\_\_

Date Received \_\_\_\_\_ # of pills or amount of liquid received \_\_\_\_\_

Medication \_\_\_\_\_ Time(s) to be given \_\_\_\_\_

Amount each time \_\_\_\_\_ Duration \_\_\_\_\_

Start Date \_\_\_\_\_ Stop Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

**Consent to give the above named medication. I release the Pulaski County School System and School Nurse of any responsibility for adverse reactions that may occur as a result of taking this medication.**