

MOUNT HOREB AREA SCHOOL DISTRICT

MEDICATION IN OUR SCHOOLS

NO medication will be administered by school personnel without the Medication Consent Form being filled out and the appropriate signatures on it.

1. Prescription Medication -Two (2) Signatures - Physician's signature and written instructions and parent's or guardian's signature. No prescription medication will be administered without both signatures.

Prescription drugs supplied in a properly labeled bottle: Name of pharmacy, student's name, name of physician, name of drug or dosage to be given.

2. Over-the-Counter Mediations - One (1) signature - Form completed and signed by the parent or guardian. No over-the-counter drug will be administered without this form and signature.

Over-the-Counter drugs must be in original container or packaging to insure that the parent's instructions do not exceed manufacture's dosages. Student's name will be written on the container.

3. Medication Consent Forms and medications will be kept in the school office. A record will be kept of when the drug was administered and by whom.
4. Parents will be requested to provide no more than a month's supply at a time.
5. Students will be responsible for coming to the office to receive the medication.

Students may self-administer their medication, but the Medication Form must be completed and signed with the appropriate signature. Medication will be stored in the office.

6. Forms must be renewed annually for students on long-term medication.
7. Three-times-a-day medication can be scheduled around school hours (before school, after school and at bedtime).
8. When going to the doctor's office, take your Medication Consent Form with you.

** Reference - 1983 Wisconsin Act 334