

Parent/Guardian Over the Counter Medication Authorization Form

2017-18

Immaculate Conception School’s physician, Rachel Vuolo, MD, has written standing orders for the medications below. Please “check” the box next to the medication(s) that you are allowing the Immaculate Conception School Nurse to administer to your child on an as needed (PRN) basis. For the safety and well being of your child, **this form is mandatory** and must be returned to the school nurse by_____. Parent/Guardian signatures are required below.

Please note: You must inform the nurse of any medication that was administered before school to prevent medication overdose and/or adverse reactions. This does not include the daily medications your child receives, which are included on their annual physical examination.

- Benadryl
- Ibuprofen
- Tylenol
- Tums
- Bacitracin
- Lozenges (ONLY administered to students in Grades 1-8)

Student’s Name _____ Grade _____

Allergies _____

Parent/Guardian Signature _____ Date _____