WALNUT CREEK SCHOOL DISTRICT

ADMINISTRATION OF PRESCRIBED MEDICATION FOR PUPIL

California Education Code, Section 49423 states: Any pupil who is required to take, during the regular school day, medication prescribed for him by a physician, may be assisted by the school nurse or other designated school personnel if the school district receives (1) a written statement from such physician detailing the method, amount and time schedules by which such medication is to be taken, and (2) a written statement from the parent or guardian of the pupil indicating the desire that the school district assist the pupil in the matters set forth in be physician's statement.

In order to comply with the Education Code, you and your child's physician must complete the form below. No medication will be administered at school until this form is completed and returned to the school site. The parent/guardian signature must be provided in the presence of the principal or school secretary.

Part I (to be filled out by parent or guardian)

My child will need medication during the regular school day and I request that he/she be assisted by designated school personnel to follow medication administration as prescribed by our physician.

Name of Pupil		Birthdate		
Address		T	elephone	
School	Grade	T	eacher	
Part/Guardian Signature		Relationship	Date	
Part II (to be filed out by attending him/her to receive the following med appropriate box.)				
Medication		Method of Adı	ninistration	
Amount		Frequency (Time Schedule)		
Remarks:				
Physician's Name	A	ddress		
Physician s Signature	Tele	phone Number	Date	_

PLEASE NOTE: This request will terminate automatically at the end of the school year and is subject to immediate termination by the attending physician. <u>All medication supplied to the school must be appropriately labeled by</u> the issuing pharmacist.