

**ROUND ROCK INDEPENDENT SCHOOL DISTRICT
AUSTIN, TEXAS
REQUEST TO DISPENSE MEDICATION**

Student: _____ Date of request: _____

Grade: _____ Teacher: _____

Condition for which medication is to be given: _____

Name of Medication: _____

Amount to be given: _____ Time: _____ Route: _____

Date medication is to be discontinued: _____

Special Instructions: _____

List significant side effects: _____

NOTE: No more than one month's supply of medication in a properly labeled bottle shall be brought to school at a time.

It is impossible to schedule the above medication at a time other than school hours. I request that this medication be given by a school employee. I understand that the School District the Board, and its employees shall be immune from civil liability for damages or injuries resulting from the administration of medication to a student, provided such administration conforms to the requirements of this policy.

I authorize the following disposition of this medication at the end of the school year.
___ I will pick it up ___ Send home with child ___ Dispose of with proper precautions

Signature of parent or guardian Day time phone number

FOR MEDICATION TO BE GIVEN LONGER THAN ONE MONTH, PLEASE HAVE PHYSICIAN OR DENTIST COMPLETE THE FOLLOWING: (daily or altered dose medications)

<u>MEDICATION</u>	<u>INSTRUCTIONS</u>
_____	_____
_____	_____
_____	_____
_____	_____

Statement of physician or dentist: It is necessary that the above named medication be given to this child at the time requested from:

Start date Discontinue date

Signature of physician or dentist Business address

Print physician or dentist's name Business phone Date

MEDICATION:

Medications may be administered at school with:

1. A parent's written request that there is a need for such medication and the parent provides the medication. This includes both prescription and over-the-counter medications. It is requested that parents ask pharmacist for an extra labeled bottle for sending medication to school. Students will be notified when medication is running low and the bottle may be sent home for a refill. Refills need to be turned into nurse prior to school starting on the day refill returned. It is requested that medications that need to be cut in half, be cut in half by pharmacist/ or parent before sending medication to school.
2. Prescription medications must be in the original container, in a properly labeled prescription bottle with the student's name, medication name, directions for dispensing the drug, and written by a physician licensed to practice in the United States.
3. Medications must be kept in the school clinic and administered by the school nurse, health assistant, or school employee.
4. A written request from a physician must be obtained if medication needs to be given for longer than 30 days (fax may be accepted).
5. Directions on over-the-counter packaging regarding age, dose and frequency will be strictly adhered to. Request to alter dosage or frequency of medications must be accompanied by a physician's written note stating the dosage and frequency of medication to be given, and that it is necessary at school (fax may be accepted).
6. Medications prescribed or requested to be given three times a day or less will not be given at school unless a specific time during school hours is prescribed by a physician.
7. An initial dose of a medication should be administered at home. Subsequent doses of medication may be administered by the school nurse, health assistant or other school employee.
8. Medications (controlled substances) will be counted by a school nurse, or health assistant upon arrival at school and documented as to the number of pills received. It is recommended that medications (controlled substances) be delivered and picked up by parents/guardians. These medications will require a parent's signature to be sent home with the student at the end of the year.
9. In extreme cases only, a student may be allowed to self-administer inhaler medication if the following two conditions have been complied with:
 - a. Written permission from the physician allowing the student to self medicate is on file in the nurse's office.
 - b. The nurse has counseled the parent on the school's inability to monitor the student's health condition during the school day while self medicating.