

Springboro Community City School District  
1685 South Main Street  
Springboro, OH 45066  
(937) 748-3960

**REQUEST TO ADMINISTER MEDICINES OR OTHER MEDICAL PROCEDURES**

**To be completed by the physician**

Student Name \_\_\_\_\_ Today's Date \_\_\_\_\_  
Student Address \_\_\_\_\_ Telephone \_\_\_\_\_  
School \_\_\_\_\_ Grade \_\_\_\_\_

Medication, dosage, and times to be administered:

\_\_\_\_\_

Possible reactions that should be reported to the physician:

\_\_\_\_\_

Special instructions, including storage and sterile requirements:

\_\_\_\_\_

Date when medication or procedures is no longer needed:

\_\_\_\_\_

\_\_\_\_\_  
(Physician's Signature)

\_\_\_\_\_  
(Physician's Telephone)

\_\_\_\_\_  
(Physician's Address)

**To be completed by the parent:**

I, hereby, authorize designated personnel of the Springboro Community City School District to administer the above named medication or procedure as instructed by the physician, and agree to:

1. Provide the school with the medication in the container in which it was dispensed by the prescribing physician or licensed pharmacist.
2. Notify the school if we change physicians.
3. Notify the school if the medication, dosage, or procedures is changed or is to be eliminated.
4. Release authorized school employees from all liability, cause of action, or any other responsibility for administering said medicines as noted above.

\_\_\_\_\_  
(Parent / Guardian Signature)

\_\_\_\_\_  
(Parent / Guardian Telephone)

\_\_\_\_\_  
(Parent / Guardian Address)

**To be completed by school personnel:**

I, hereby, acknowledge reading this request to administer medication; and understand its content, as well as the content of the Board policy printed on the back of this form.

\_\_\_\_\_  
(Principal's Signature)

\_\_\_\_\_  
(School Nurse's Signature)

\_\_\_\_\_  
(Other Authorized Staff Member)

## BOARD OF EDUCATION POLICY #5330 – USE OF MEDICINES

The Board of Education will consider the diagnosis and treatment of illnesses and the prescription of all, medications, preparations, and/or remedies as the direct responsibility of the parent(s) and/or licensed prescriber of their choice.

The total responsibility for dispensing or administering any nonprescribed (over-the-counter) drugs, medications, preparations, and/or remedies shall rest solely with the parent(s) or legal guardian and that student. At no time shall a student sell or give medication to another student. This will result in appropriate disciplinary action. School personnel will, under no circumstances, dispense or administer such nonprescribed (over-the-counter) medications to any student. Misuse of any medication will be considered a violation of the Board Substance Abuse Policy and the Student Code of Conduct.

Whenever possible, the Board believes it is in the student's best interest for prescription medications to be administered at home before or after school. All parents are strongly urged to arrange for administering of medications at times other than during school hours.

For purposes of this policy "medication" shall include all medicines including those prescribed by a licensed prescriber or are referred to in this policy as prescribed medication. "Treatment" refers both to the manner in which a medication is administered and to health-care procedures which require special training. such as catherization.

Students in grades K-12 who require medications and/or medically prescribed treatment during the school day shall follow these procedures:

- A. The school nurse or an appropriate person designated by the building principal will supervise the secure and proper storage and dispensing of medications. The school nurse will be responsible for training school personnel in medication administration. The following staff are designated to administer medications or medically described treatments:
  1. principals;
  2. teacher;
  3. school nurse;
  4. building secretary;
  5. aides;
  6. bus drivers;
  7. and other staff deemed necessary.
  
- B. The medication must be received in the container in which it was dispensed by the licensed prescriber or licensed pharmacist and labeled with the student's name, name of medication and strength, dose of medication and times and intervals of administration. A note approving the use of over-the-counter medication from the parent/guardian must accompany any over-the-counter medication to be administered by the student. Over-the-counter medications must be administered by the student. The parent is responsible for the

safe delivery of prescription medication to the appropriate school personnel. Prescribed medication must be administered in the presence of appropriate school personnel.

- C. The Request to Administer Medications or other Medical Procedures Form must also include a statement signed by the licensed prescriber who prescribed the medication and signed by the parents/guardian that includes all of the following information:
1. the name, address, school, grade of the student and date of birth
  2. the name of the medication or medically prescribed treatment, the route of administration, and the dosage to be administered
  3. the times or intervals at which each dosage of the medication or medically prescribed treatment is to be administered
  4. the date the administration of the medication or medically prescribed treatment is to begin
  5. the date the administration of the medication or medically prescribed treatment is to cease
  6. any severe adverse reactions that should be reported to the licensed prescriber and one or more phone numbers at which the licensed prescriber can be reached in an emergency
  7. special instructions for administration of the medication, including sterile conditions and storage
- D. Students will be allowed to carry medications deemed necessary by the licensed prescriber, for severe life threatening conditions, if the student has the Request to Administer Medications or other Medical Procedures Form on file. These medications must also be labeled appropriately.
- E. The parent, guardian or other person having care or charge of the student shall submit to the school nurse or principal a revised statement signed by the licensed prescriber who prescribed the medication if any of the information provided by the licensed prescriber as described above changes.
- F. A New Request to Administer Medications or other Medical Procedures form must be submitted at the beginning of each school year and for each new medication prescribed during the school year. If a student will be attending a school sponsored overnight activity, the form submitted must include twenty-four (24) hour dosing guidelines.
- G. The school nurse or principal shall ensure that by the next school day following receipt of the completed parental request and licensed prescriber's statements, copies of any such statements are given to the person authorized to administer medications to the student for whom the statements have been received.
- H. The school nurse or building principal shall establish a location in the school building for the storage of medications to be administered. All such medications shall be stored in that location in a locked storage place. Medications that require refrigeration may be kept in a refrigerator in a place not commonly used by students.

- I. No person who has been authorized by this policy to administer a medication and who has a copy of the most recent licensed prescriber's statement which has been given to him/her prior to administering the medication shall be liable in civil damages for administering or failing to administer the medication unless such person acts in a manner that constitutes gross negligence or wanton or reckless misconduct.
- J. A record of dosage administered to the student by the authorized person in the school shall be kept for the duration of the prescription.
- K. No employee of the Springboro Community City Board of Education shall be required to administer a medication to a student if the employee objects on the basis of religious convictions to administering the medication.
- L. Medication remaining at the end of each school year must be picked up by the parent/guardian within one (1) week of the end of the school year or it will be discarded.
- M. All dental disease prevention programs sponsored by the Ohio Department of Health and administered by school employees, parents, volunteers, employees of local health districts or employees of the Ohio Department of Health which utilize prescription medications for the prevention of dental disease and which are conducted in accordance with the rules and regulations of the Ohio Department of Health are exempt from all requirements of this policy. This policy does not apply to or otherwise regulate dental disease prevention programs sponsored by the Ohio Department of Health.

R.C. 3313.711, 3313.712. 3313.713

Revised 10/11/90

Revised 12/16/93

Revised 9/12/95

Revised 10/22/02