

Syracuse Arts Academy

Medication Authorization Form

Please complete fully and carefully

Utah Law (53a-501) states the following:

Medication may only be administered to a student by school personnel if:

1. The student's parent or legal guardian has provided a current written and signed request that medication be administered to the student during regular school hours, and
2. The student's physician, dentist, nurse practitioner, or physician assistant has provided a signed statement describing the method, amount, and time schedule for administration, and a statement and a administration of medication by the school employees during periods when the student is under the control of the school is medically necessary.

THE FORM BELOW PROVIDED TO HELP YOU OBTAIN THE REQUIRED INFORMATION FROM YOUR DOCTOR, OR OTHER MEDICAL PERSONNEL AS STATED IN THE LAW. WITHOUT THIS COMPLETED FORM MEDICATION CANNOT BE GIVEN TO YOUR CHILD BY ANY SCHOOL PERSONNEL.

This completed form must be brought to the school by a responsible adult with the medication in the original, labeled container on or before the first day the medication is to be administered by school personnel. (Please see the second page of this document for instructions on completing this form.)

Request for Giving Medication at School

(This form must be signed by Physician or other Prescribing Professional)

The following medication is prescribed and should be taken at school as indicted below.

Student Name: _____

School: _____

Teacher: _____

Grade: _____

Medication: _____

Dosage: _____

Time of Day: _____

Method: _____

Duration: _____

Reason for Medication: _____

Special Instructions: _____

Physician's Name: _____ Physician's Phone Number: _____

Physician's Signature: _____

Parent: I understand that prescription medication must be provided in the labeled prescription bottle with the correct child's name on it. If the medication is an over-the-counter drug, it must also be in the original container and must have the child's name written on the package. I also understand that school personnel may contact the doctor regarding administration of this medication. I also understand this medication maybe administered by someone other than a licensed nurse who has been appointed to do so by the school administer.

Signature of Parent or Legal Guardian

Date

Instructions for Completing Medication Authorization Form

All Prescriptions and over-the-counter medications are kept in the main office and will be administered only as authorized by the parent and child's physician. Important: we cannot administer any medication you send for your child without this signed form.

Steps to complete the Medication Authorization Form:

1. Medication must be prescribed by a Utah licensed physician.
2. Prescription medication must be provided in the original container labeled by a Utah Pharmacist. Non-prescription medication must be provided in the original container with specific directions.
3. All medication, both prescription and non-prescription, require a physician's signature, and complete (legible) instructions from the physician.
4. Verify that all medications are properly labeled and not expired:
 - a. Medications are in their original container.
 - b. Prescription medications are properly labeled by a Utah Pharmacy, including:
Student Name (Prescription must be for the student only.)
Medication Name
Precise Dosage instructions, quantity and frequency.
 - c. Non-prescription medications are properly labeled, including:
Manufacturer's label with the medication name, dosage, and instructions.
Add your child's name, (first, last & middle initial)
 - d. Prescription and non-prescription Medications cannot be expired.
5. Fold this form and place it in a zip-lock baggie with the medication. (Each medication requires its own form, but you can put multiple medications into one zip lock baggie.)
 - a. Label the baggie with your child's full name. (Using masking tape.)
 - b. Do not send any medication to the school with your student or in their backpack. An adult should deliver the medications with the form to the office.
 - c. Homeopathic, herbs, and vitamins require a medical authorization form to be completed by your physician.

Thank you for your cooperation and help. We appreciate your time to complete this form. It is important information that will help make your child's experience safe and enjoyable!