



Kimberly Area School District Health Services

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Medication Consent Form 2023-2024 Grades 4K through 6

Student:	Date of Birth:	School:	Grade:
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Section 1: Prescription Medications

Medication	Dose	Route*	Time	Reason/Diagnosis

*Route = oral, inhaled, topical, injectable, etc. **All prescription medications must be in a properly labeled pharmacy container.

Section 2: Over-The-Counter (OTC) Medications

Medication	Dose	Route*	Time	Reason/Diagnosis

*Route = oral, inhaled, topical, injectable, etc. **All over-the-counter medications must be in the original container.

Parent Consent for Medication Administration

I hereby give permission to designated school personnel to communicate with the health care provider as allowed by HIPAA and further authorize notification of appropriate school personnel of medication administration and possible adverse effects of the medication. I will keep the school district aware of any changes in medication or health concerns for my student.

Administration of medication by staff: I hereby give permission to designated school personnel to give medication to my student according to the written instructions of the practitioner as shown on this form. I agree to hold the Kimberly Area School District and its employees who are acting within the scope of their duties harmless from any and all claims arising from the administration of this medication.

Parent/Guardian Signature _____ Date _____

Practitioner Information/Consent

This section must be completed whenever the following conditions exist:

- Any prescription medication
- Any OTC medication given outside the recommended dosage on the manufacturer's label

Practitioner signature directs the above medication administration and indicates willingness to communicate with school staff regarding this medication.

Practitioner Name _____ Phone _____

Practitioner Signature _____ Date _____

Principal Initials _____

INFORMATION SHEET FOR ADMINISTRATION OF MEDICATIONS TO STUDENTS

In compliance with Wisconsin State Law, the Kimberly Area School District has adopted a policy for the administration of medications. For medication to be administered safely and efficiently, parents and students must comply with district policy.

Medication should be administered at home whenever possible.

All medications administered by KASD staff are only available to students during school hours (Elem 8:30-3:30; Inter 7:30-3:00)

Only the school nurse shall receive a telephone order for any change in medication.

PRESCRIPTION MEDICATION

- 1. The current Medication Consent form must be on file and signed by the parent and the prescribing practitioner.**
- 2. The prescription medication must be in the original pharmacy-labeled container indicating the correct dosage and frequency of administration. This information must be the same as provided on the Medication Consent form.**
- 3. If there are changes in the medication type, route, dosage, frequency or time given, an updated Medication Consent form and an updated pharmacy-labeled container will be required.**
4. For medication provided to school, your pharmacist can provide a second empty labeled container so that you will have containers for home and school. Medication will not be given if in an unmarked container (ie. baggie or envelope filled with pills).
5. For controlled substances provided to school, school staff will verify the amount of the medication delivered by counting individual units of medication in the presence of either the adult who delivers it or another school staff member.

NON-PRESCRIPTION MEDICATION (over-the-counter)

- 1. The current Medication Consent form must be on file and signed by the parent.**
- 2. Medication must be supplied in the original manufacturer's container with the student's name affixed on the package. Other packages, such as a baggie or envelope filled with pills, will not be accepted.**
3. Practitioner signature is required for OTC medication given outside of the recommended dosage on the manufacturer's label.
4. Substances that are not FDA approved (i.e. natural products, food supplements) will require the written instruction of a practitioner and the written consent of the parent.