



School Health
Health Care District Palm Beach County

Parent Guide for Medications at School

The following is required before any medication can be taken by or administered to a child on school grounds:



1. A new Authorization for Medication / Treatment Form, including Diabetes Medical Management Plan (DMMP), is required each school year and for any changes.



The form (available in the physician's office) must be **completed and signed by the prescribing physician** for each medication.



The form must also have **the parent's /guardian's signature** in order for the medication to be administered.

2. Prescribed and Over-the-Counter Medications:



Prescribed medication **must match physician's order**, be in the **original container** with a **pharmacy label that is not expired**, showing student's name, physician's name, medication name, dose and administration information; prescription number (if applicable), prescription date, and medication expiration date. *When filling your prescription, request the pharmacy label's expiration date to state, "See Manufacturer's Medication Expiration Date."*



Over-the-counter medications must be in the **original unopened container**, **not expired and labeled with the student's name**.



Medication must be **delivered to the school by the custodial parent/guardian**, not your child. A medication count and co-signature for the delivery and receipt of the medication will be required.

A copy of the Parent Guardian Consent for School Health Services (PBSD2667) consenting to Illness and Injury services must be on file with the school. The form can be obtained from the school's front office, health room, or School District Web Site.



3. A current photo of the child is required for identification purposes and will be attached to the medication record. **The photo must be delivered with the physician's authorization and medication.**

All requirements (forms, packaging, photo) must be met for the medication to be received and administered to the Student at School.



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