REQUEST FOR ADMINISTRATION OF MEDICINES

My child has been diagnosed as suffering from
He/she is considered fit for school but requires the following $\underline{\textit{prescribed medicine}}$ to be administered during school hours:
Names of medicine
Could you please administer
With effect from(date) (date)
The medicine should be administered by mouth / in the ear / nasally
If other please specify:
I understand that all staff are acting voluntarily in administering medicines and have the right to refuse to administer medication. I understand that the school staff can not undertake to monitor the use of inhalers carried by children, and that the school is not responsible for loss or damage to any medication.
I undertake to update the school with any changes in administration for routine or emergency medication and to maintain and in-date supply of the medication.
Signed:
Name of signatory:(Please print)
Child's name: (Please print)
Please note the following quotations from the County Code of Practice regarding the administration of medicines at school.

- Children who are acutely ill and require a short course of medication e.g. antibiotics, will normally remain at home until the course is finished. If it is felt by a medication practitioner that the child is fit enough to return to school, the dosage can usually be adjusted so that none is required at lunch-time.
- No medicine should be administered unless clear written instructions to do so have been obtained from the parents or legal guardians and the school has indicated that it is able to do so. It must be understood that all staff are acting voluntarily in administering medicines.