

St. Paul the Apostle School
School Health Record/Medication Form
 2018-2019

Student Last _____ Student First _____

Names of Parent/Guardian _____

Please circle yes or no:

YES NO Is your child allergic to medication, food, bee stings, or environmental allergens?

If yes, please list name of allergen/reaction _____

YES NO Does your child take medication (s) on a routine basis?

If yes, list name and times taken _____

YES NO Does your child have a medical diagnosis of a chronic health condition such as diabetes, asthma, heart problems, seizures, etc?

If yes, list condition _____

Please list any additional health related concerns that you would like to have reviewed by the Scott County Health Department Nurse: _____

This document is used for evaluating the physical and emotional condition of each student to meet the student's health needs. This health information may be shared with the school and health staff including student's teacher(s), aides, school office staff, school's nurse representative from Scott County Health Department, school principal, and school psychologist for the purpose of meeting student health and learning needs.

Parent/Guardian signature _____ **Date** _____

PERMISSION TO ADMINISTER MEDICATION

The school has Jr. Strength Acetaminophen and Jr. Strength Ibuprofen in dissolvable tablets, and Regular Strength Acetaminophen and Ibuprofen. **We will administer medication according to the recommended dose for the student's age and weight.**

I authorize school personnel to administer the following OTC (over-the-counter) medications as needed / requested by my child.

Student's Age _____	Student's Weight _____			
IBUPROFEN:	100mg chewable	OR	200mg tablet	# of Tabs _____ Initials _____
ACETAMINOPHEN	160mg chewable	OR	325mg tablet	# of Tabs _____ Initials _____
Name of Medication brought from home: _____				
			Dosage _____	Initials _____

Signature of parent or guardian _____

Date _____

Kindergarten Students Only:

Lead test (children age 6 years or under)
Date _____ Result _____