Administration of Medication

Parent / Carer Authority Form

The Education and Care Services National Regulations states that parents must comply with the following regulations before medication is administered:

- Notify the Director in writing of a health condition requiring medication at OSHC.
- Request OSHC in writing to administer prescribed medication or to assist in the management of a health condition.
- Notify OSHC in writing of any requests and/or guidelines from medical practitioners including potential side effects or adverse reactions.
- Provide the medication in the original labelled container to the nominated staff member.
- Ensure the medication is not out of date and has an original pharmacy label with the student’s name, dosage and time to be administered.
- Notify OSHC in writing when a change of dosage is required. This instruction must be accompanied by a letter from a medical practitioner.
- Advise the school in writing and collect the medication when it is no longer required at school.

*Analgesics (eg Panadol), cough mixtures and other over-the-counter medications will not be administered without special authority from the child’s doctor.*

Parent / Carer Permission (please complete the following details)

Child’s Name: ___________________________ Class: _________

Medication: _____________________________

Dosage & Time for administration: _____________________________

Doctor who Prescribed: _____________________________

Probable period of treatment: _____________________________

Permission for child to self-administer the medication: _____________________________

Parents Name: _____________________________

I hereby authorise medication to be administered to my child.

Signature: _____________________________ Date: _________

Director Authority

Signature: _____________________________ Date: _________

Privacy

Patricks Road State School OSHC is collecting the information on this form for the purpose of student health and emergency management. The form will be securely stored within the school. Patricks Road State School OSHC may disclose the information to third parties eg Hospital, Doctor, Ambulance, Fire, Police and venue operators to ensure the health and safety of your child.

Unused Medication

☐ Parent collected Date: ____________

☐ Medication Disposed Date: ____________

Office Use Only

☐ New student for medication ☐ Change of dose

☐ Doctor authority

☐ Parent permission

☐ Medication labelled (or copy of label provided)