

*Where a child must take prescribed medicines, it is essential that a written request comes from a parent and that the request gives all necessary details. Parents may use the pro-form below in which case please use block capitals and return this form to the School Office. Please also read the Medical Notes on the reverse.*

**PRESCRIBED MEDICATION**

**To the Head, Claires Court School**

**PUPIL'S NAME:** .....

**As parent or guardian of the above named pupil, I request that you arrange for the administration of the following medication which has been prescribed for the conditions stated:**

**CONDITION:** .....

.....

.....

**MEDICINES:** .....

.....

**DOSAGE:** .....

.....

**I have clearly labelled all medication with the name of the medicine, the name of the pupil and the appropriate dosage. I understand that although the School will endeavour to administer the medicine according to the instructions given, no responsibility can be accepted if a dose is late or missed.**

**Signed:** ..... **Date:** .....

**Print name in full:** .....



*To Parent: please tear off this slip and keep for your own reference.*

**Date:** ..... **Name of Pupil:** .....

**Medication:** ..... **Dosage:** .....

**Condition:** .....

## MEDICAL NOTES

### **Medical Information Form**

The School holds a copy of each pupil's medical details and emergency contact telephone numbers. New parents are reminded to return these to the Office as soon as possible. (Spare copies are available from the School Office.)

May we also remind parents to inform the office of any changes as they occur so that our records remain up to date.

### **Prescribed Medication Form**

In order to comply with guidelines, the School is required to have these forms completed when we need to administer medicines to pupils. In the School's view, there are three possible sets of circumstances where this involvement may be necessary:

- i where a pupil, recovering from a short term illness, is well enough to return to school but is receiving a course of antibiotics or cough medicine;
- ii where a pupil has a chronic illness or ongoing complaint such as diabetes, asthma or epilepsy;
- iii where a pupil is in good health but could suffer a major allergic reaction (e.g. peanuts, wasp stings) for which adrenalin or similar medication may have to be given.

In cases (ii) and (iii), such information should be detailed on the form to ensure the School is in full possession of all facts prior to any action being necessary. This form should be updated on a half-termly basis and we should also be informed of any pupils who are controlling their own medication. Forms may be obtained from the School Office. If a parent is unable to complete a form, then a letter giving full instructions must accompany any medication.

It is understood that although the School will endeavour to administer the medicine according to the instructions given, no responsibility can be accepted if a dose is late or missed.

***Medicine in the smallest practicable amount should, wherever possible, be brought to school by the parent and delivered personally to the Office.***