

Authorization for Medication Administration



Parent/Provider fill in this section.

Child's Name: (Last) _____ (First) _____	Father's Name: _____
Date of Birth: (DD/MM/YYYY) _____	Mother's Name: _____
Cell Phone: _____	Address: _____
Work Phone: _____	
Allergies: _____	

Provider fill in this section.

Section 1: Physician's Instructions		
Physician must complete this section for all medication, including vitamins, that will be administered at FCC Daycare Center. Please do not omit any information.		
Name of Medication: _____	Indication for Medication: _____	
Dosage: _____	Route: _____	Times to be given –or– Interval between doses: _____
If medication is to be given on an as-needed basis, specify the symptoms or conditions when medication is to be taken and the interval at which it should be given again.		
Effective From: _____	Effective Until: _____	Possible Side Effects: _____
Are there any special instructions for the medication (refrigeration, administration with food, etc...)? <input type="checkbox"/> None		
Physician's Name: _____	Signature of Physician: _____	
Address: _____	_____	
Phone: _____	License Number: _____	Date: _____

Parent fill in this section.

Section 2: Parental Consent	
Is this a new medication for your child? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date and time first dose was given at home: Date: _____ Time: _____
I hereby request and authorize FCC Daycare Center staff to administer the prescribed medication as directed above by the physician. I have read the procedures on the reverse side of this form and agree to assume responsibility as required.	
Father's Signature: _____	Date: _____
Mother's Signature: _____	Date: _____

Authorization for Medication Administration



Medication Administration Requirements

If medication is needed while your child is at FCC Daycare Center, the following requirements must be met on the first day that your child is to receive medication:

1. No medication will be administered without the parent's signed consent and the physician's written medication authorization order. This will be kept in your child's file. The parents are responsible for obtaining the required information from the physician.
2. A separate parent consent form and physician's medication authorization order must be on file for each medication your child is to receive at FCC Daycare Center.
3. The medication must be in the original box, bottle or container.
4. The first dose of any new medication must be given at home.
5. All medications must be handed over directly to the daycare Administrator or Head Teacher with this form.
6. The parents are responsible for submitting a written notification from the physician if any change in dosage or time of administration has been made.
7. All medication kept in the center will be stored in a secure area that is inaccessible to children.
8. Within one week after expiration of the prescription order, the unused portion of the medication must be collected by the parents or it will be destroyed.