

Guide for Prescription and Non-Prescription Medication For School Age Children

In order for members of our Ashokan Center medical team to administer any over the counter medications or any of your child's prescription medication, the following requirements must be met.

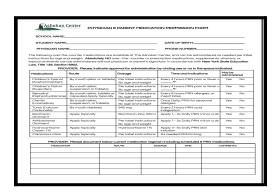
New York State Education Law, Title 139, Section 6902

An order from a physician/medical prescriber is required for both prescription and non-prescription medications.



The Physician & Parent Medication Permission Form MUST

- Be properly dated
- Have the student's name and date of birth
- Contain medication name
- Contain medication dosage
- Contain medication administration route (oral, nasal, topical, etc)
- Contain time and frequency the medication is to be administered
- Contain the conditions under which the medication is to be administered if applicable (after eating for example)
- Contain the medical physician/prescriber's name, title, and signature
- Contain the medical physician/prescriber's telephone number and address.
- Contain the medical physician/prescriber's office stamp
- The medical physician/prescriber's order must be in its original, unaltered form. Orders containing any
 edits render the order invalid
- A medical physician/prescriber's order is typically valid for 12 months from the date of its issuance unless the provider changes the order, writes the order for a shorter period of time, or discontinues the order



Please make sure the form has <u>both</u> the parent/guardian signature and the signature/stamp of the physician/prescriber.



All prescribed medication MUST be in a properly labeled pharmacy container specific to the listed medication and that student only. A parent may request an extra labeled medication container from their pharmacy in order to legally transport and safely administer medication during their child's stay at the Ashokan Center.

- Please provide only enough medication for the trip, plus one extra dose.
- All over-the-counter medications (OTC's) must be unopened, not expired, and in their original container. Sealed blister packaging is acceptable.

Any medications arriving without valid orders and/or improperly packaged, ie- ziplock bags, non-pharmacy issued containers or pharmacy containers containing medications other than what is listed on the label will be refused and returned to the school representatives attending the trip.

If you have any questions regarding medication administration or need to speak with a member of our Ashokan Center Medical Team, please email

nurse@ashokancenter.org

or call (845) 657-8333 Ext 21



PHYSICIAN & PARENT MEDICATION PERMISSION FORM

STUDENT NAME:					DATE OF BIRTH:			
PHYSICIAN NAME:				_ PHONE NUMBER:				
structions by age ar pical ointments can ducation Law, Title 1	e-counter medications are a nd weight. Absolutely, NO on be administered without a p 39, Section 6902. VIDER: Please, indicate app	verthecount ohysician and	er or pres parent's si	cription m gnature i	edications, sup n accordance v	oplements, with New Y	vitamins ork State	or
Medications	Route	Dosage		Time and Indications		May be Administered		
Children's Tylenol (Acetaminophen)	By mouth (elixir or tablets)	Per label instructions By age and weight		Every 4-6 hours PRN pain or fever >		Yes	No	
Children's Motrin (Ibuprofen)	By mouth (elixir, suspension or tablets)	Per label instructions By age and weight		Every 6-8 hours PRN pain or fever >		Yes	No	
Benadryl (Diphenhydramine)	By mouth (elixir, tablets or capsules) Apply topically	Per label inst		Every 6 hours PRN allergies, or insect bites			Yes	No
Claritin (Loratadine)	By mouth (elixir, suspension, or tablets)	Per label instructions By age and weight		Once Daily, PRN for seasonal allergies		Yes	No	
Tums (Calcium Carbonate)	By mouth (tablets)	840 mg		Every 2 hours PRN acid indigestion		Yes	No	
Bacitracin Ointment	Apply topically	Bacitracin Zinc 500 U		Apply 13x Daily PRN minor cuts		Yes	No	
Antibacterial Ointment	Apply topically	Per label instructions By age and weight		Apply 13x Daily PRN minor cuts		Yes	No	
Hydrocortisone Cream 1%	Apply topically	Hydrocortisone 1%		Apply 34x Daily PRN skin irritation		Yes	No	
Calamine Lotion	Apply topically	Per label instructions As nee		As need	eeded PRN itching		Yes	No
PROVIDER MEDICATIO	R: Please document below o	current medica		en includi SAGE	ng scheduled 8	i	lications.	
	I		<u> </u>		<u> </u>	l		
Physician/ Provider	Signature:			Date		License#_		



ASHOKAN CENTER MEDICATION REQUIREMENTS

BOTH PARENT AND PHYSICIAN SIGNATURES ARE REQUIRED OR FORM IS INVALID

The following requirements must be met in order for the Ashokan Center to legally administer **any** medications including over-the-counter (OTC); consistent with the **NYS Department of Education law 6902**

- A valid medication authorization form.
- A parent/guardian and physician signatures.
- Medications properly packaged.
- These are explained in more detail below:

A valid medication authorization form- An order from the prescriber is required for **both prescription and non-prescription medications**.

The provider order **must** include the following information:

- Date order is written.
- Student name and date of birth
- Medication name.
- Medication dosage.
- Medication route.
- Time and frequency the medication is to be administered
- The conditions under which the medication is to be administered if applicable.
- The provider's name, title, and signature.
- Provider's telephone number and address.
- **Provider's Office stamp.** A provider order must be in its original, unaltered form. Orders containing any edits render the order invalid.
- A provider order is typically valid for 12 months from the date of its issuance unless the provider changes the order, writes the order for a shorter period of time, or discontinues the order. Medications will be administered per the physician's written orders only.

Medications properly packaged:

- All prescribed medication MUST be in a properly labeled pharmacy container only. A parent may request
 an extra labeled medication container from their pharmacy in order to legally transport and safely
 administer medication during their child's stay at Ashokan.
- Please provide only enough medication for the trip, plus one extra dose.
- All OTC medications must be unopened and in their original container. Sealed blister packaging is acceptable.

Any medications arriving without valid orders and/or improperly packaged will be refused and returned to school staff attending the trip.