

Houston Independent School District Health and Medical Services

Policies Governing Administering Medication During School Hours

The policy of the Board of Education does not authorize Houston school personnel to give medication of any kind. That includes aspirin, similar preparation, or any other drugs.

Nurses and other school personnel, however, can give medication during school hours under the following restrictions. Pupils who are noncontagious, on long-term medication, on preventative medication, or for a prolonged period on medication that cannot under any arrangement be administered other than during school hours may take medication in school. The healthcare provider's statement must be accompanied by written permission of at least one parent.

Healthcare Provider's Request for Administration of Medication at School Building During School Hours

To the principal of:	School	Date:
Name of child:		Birthdate:
Diagnosis:		☐ Non-Infectious
In order to keep this child in optimal health and to	help maintain school p	erformance, it is necessary that
medication be given during school hours.		
Name of medication:	medication: Color (if applicable):	
Form of medication:		
□tablet □ pill □ capsule □liquid □	•	
□other (specify):		
(* Injectable medications may be given at school only when the fan and Medical Services, giving detailed information concerning the ac furnish sterile, disposable syringes and needles which will be return	dministration of the medication	and follow-up. Parents shall be instructed to
Dosage (amount to be given):		
Frequency:		
Common side effects:		
Remarks:		
This is permission to give medication to my child named above as requested by the physician. I understand that I am giving consent for the school nurse to discuss any concerns regarding	Facility Name	
this medication with the healthcare provider whose signature appears on this document in order to monitor the healthcare needs of my child.		vanced Practice Nurse Signature
Parent's Signature	Physician's/Adva	anced Practice Nurse Name (print or type)
	Telephone	
Telephone:		
Date:		
		EH/ydb REV 07/17/2008