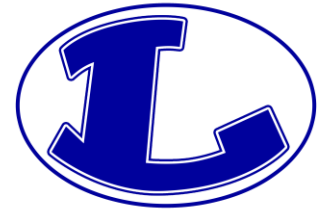


LAMPASAS INDEPENDENT SCHOOL DISTRICT
SCHOOL HEALTH SERVICES
207 W. 8TH STREET
LAMPASAS, TX 76550



MEDICATION ADMINISTRATION FORM

Student Name: _____ Date of Birth: _____

Medication Allergies: _____

Other Medications Taken at Home: _____

Today's Date: _____ This medication form is valid for the current school year: **202** - **202**

Students in grades PreK-12 **ARE NOT ALLOWED** to carry any medication, prescribed or over the counter, or to self-administer the medication unless ordered by a U.S. licensed medical practitioner for diabetes, asthma, and/or anaphylaxis. **By law, the only medications with a medical order/permission that may be carried by a student is an asthma inhaler, EpiPen, and/or insulin/diabetic medications.**

Lampasas ISD School Health Services require the following:

- ONLY those medications that are medically necessary during school hours for a student's attendance should be sent to school. The first dose of medication may not be given at school.
- A U.S. Medical Practitioner's written order and parent/guardian consent dated for the CURRENT school year signed by the parent, legal guardian, or other person(s) having legal authority of the student AND the medical practitioner who is or other healthcare professional with prescriptive authority who is licensed to practice in Texas.
- Medication in the original, properly labeled container from a registered pharmacist with the label intact and non-expired. Label must include name of student, name of medication with strength, dosage, directions, route to be given, and name of prescribing physician or other healthcare professional with prescriptive authority who is licensed to practice in Texas.
- Non-prescription and over the counter (OTC) medications also require the above (FFAC Local).

MEDICATION ADMINISTRATION INSTRUCTIONS

Instructions must be filled out by Provider

Medication Name	Dosage	Time(s) to Give Medication	Route Taken	Condition For Which Medication is Given	Medication Expiration Date

Special medications instructions: _____

ALL UNCLAIMED MEDICATIONS WILL BE DISPOSED OF ON THE LAST DAY OF SCHOOL AS REQUIRED BY LAW.

- I request authorized Lampasas ISD staff to administer the medication(s) listed on this form to my child during school hours to include field trips according to the medication label or physician instructions. Any changes in medication and / or dosage requires a new physician's order and signature.
- I release school staff from liability in the event of ill effects that may occur with administration of a medication.
- I agree to abide by federal and state law and Lampasas ISD guidelines for medications in the school setting.
- I understand that the school nurse may designate trained Lampasas ISD staff to administer medication(s).

Parent/Guardian Signature

Parent/Guardian Name (PRINT)

Date

Physician Signature

Physician Name (PRINT)

Date

Updated: 07/12/24

MEDICATION ADMINISTRATION POLICY

Medication may be administered at school with:

- A parent or guardian's written request that there is a need for medication during the school day and **the parent brings the medication to the campus clinic**. This includes both prescription and over-the-counter medications.
- **No medication is provided by the school.**
- Medication must be kept in the school clinic and administered by the campus nurse or designated employee.
- **It is the primary responsibility of the student to report to the designated area to take his/her medication. The student will not be called by the nurse to administer medication.**
- **Over the counter (OTC) medication must be in the original, properly labeled container with the label intact and non-expired.** Label must include name of student, name of medication with strength, dosage, directions, route to be given, and name of prescribing physician or other healthcare professional with prescriptive authority who is licensed to practice in Texas.
- Prescription medication must be in the original container and non-expired. It must be properly labeled in a prescription bottle/box with the student's name, medication name, and directions for dispensing the drug and written by a physician licensed to practice in the United States. **A new prescription label is required for any dosage or medication change.**
- Medication MUST be hand delivered to the school by the parent. They cannot be transported on the bus or by the student. If the parent is unable to hand deliver the medication to the school, the parent must call and make arrangements with the campus nurse. Likewise, the nurse will not send controlled substances home with the student or on the bus. If a medication needs to be returned to the home from the school, then the parents are asked to pick up the medication at the clinic. The school will maintain a count of all controlled substances.
- Medications prescribed or requested to be given three times a day **will not** be given at school all three times unless a specific time of administration during school hours is prescribed by the physician.
- A student may be allowed to self-administer inhaled asthma medication, Epi-pen, or diabetes treatment **ONLY** if the following conditions have been complied with:
 - a. Written permission from the physician allowing the student to self-medicate or treat.
 - b. The nurse has counseled the parent and the student on the school's inability to monitor the student's health condition during the school day while self-medicating or treating.
 - c. The student complies with all campus safety policies.
- No district employee will administer herbal substances, anabolic steroids, or dietary supplements except as prescribed by a physician if it is required by the IEP or Section 504 plan of a student with a disability. Medication must be provided by student's parent or guardian. Reliable information must be given by the physician regarding the safe use of the product including side effects, toxicity, drug interactions and adverse effects.

YOU CAN OPT IN TO RECEIVING AUTOMATED EMAILS FOR WHEN MEDS ARE LOW THROUGH FAMILY ACCESS. FAMILY ACCESS MUST HAVE A CURRENT EMAIL ADDRESS IN THE SYSTEM.

In accordance with the Nurse Practice Act; Texas Administrative Code, Section 217.11, the Registered Nurse and the Licensed Vocational Nurse have the responsibility and authority to refuse to administer medications that, in the nurse's judgment, are contra-indicated for administration to the student.

Kline Whitis Elementary	Hanna Springs Elementary	Taylor Creek Elementary	Lampasas Middle School	Lampasas High School	Director of School Health
500 S. Willis	604 E. Ave. F	2096 Big Divide Rd.	902 S. Broad	2716 S. Hwy. 281	207 W. 8th St.
Lampasas, TX 76550	Lampasas, TX 76550	Lampasas, TX 76550	Lampasas, TX 76550	Lampasas, TX 76550	Lampasas, TX 76550
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