

NHS CONFIDENTIAL

Consent to Administer Medicines

Dear Parent/Carer

Please list the medication your child needs to take in school and sign below giving permission to the school nurse to administer in school. This should include regular medication, medication to be given as needed and/or emergency medication.

NB All medications must be prescribed by a doctor and sent to school in the original container with the prescription label still attached. The school nurse must be informed of any changes in writing. Please contact the school nurse if you need any help in completing this form.

Child's Name

D.o.b.

Address

NHS no.

Name and preparation of medicine	Dose	Route	Time of day to be given	Time of day to be given	Any comments about how to give this medication

1. I give/ do not give my consent for the nurse to give my child the above medications which have been prescribed for them – and confirm I have Parental responsibility
2. I give/ do not give consent for my child to receive Paracetamol when necessary
3. I give/ do not give permission for my child to be given short term medications e.g. a course of antibiotics. (These must be sent in the original packaging with pharmacy label)

Signed..... Name of parent/carer Date

Medical Update Form

Name of pupil: _____ D.O.B. _____

Address: _____

_____ Post Code: _____

Name of Parents/Carer: _____

Telephone Number: _____

Emergency Number: _____ Name of Contact: _____

Medical Condition/Syndrome: _____

Name, Address, Tel. No. of Family Doctor: _____

Name of Consultant(s): _____

Does your child take prescribed medication? YES / NO

If YES, please complete below. **To include all medication taken over 24 hours.**

Name of Medication	Reason for Medication	Times Given	Dosage

Name of Social Worker: _____

Name of any other professionals involved: _____

Any other information you feel may be of use in school, e.g. diet, allergies etc.:

Religion: _____ Ethnic Origin: _____

Home Language: _____

Parent with legal responsibility (PLEASE PRINT): _____

Signed: _____ Date: _____