

Procedures For Administration Of Over-The-Counter Medication

The faculty, administration, and board of education recognize that the utilization of medication is a serious health concern affecting our students and faculty. The Logan-Hocking schools' philosophy of health focuses on the wellness of the student.

Where over-the-counter medication is used and the timetable for it involves the regular school day, the following procedures will be followed:

1. Written communication from the parent/guardian (see attached "request for administration of over-the-counter medication") must be completed in its entirety.
2. All medication must be sent in the original container in which it is dispensed/purchased.
3. It is preferable that the parent bring the medication to school, but if this is not possible, please seal the medication in the original container in an envelope. Upon arrival at school, the student will take the request form and medication (for safe storage) to the secretary or nurse in the student services office.
4. All medication will be given to the student in the presence of board-designated personnel.

Request For Administration Of Over-The-Counter Medication

Logan-Hocking School District
2019 E Front ST
Logan, Ohio 43138

Student name: _____

Address: _____

School: _____

Class or grade: _____

Please complete all areas of this form. All information requested is required by Ohio law.
Thank you.

Over-the-counter medication: _____

Dosage: _____ **time of day to be given:** _____

Date administration of this medication is to begin: _____

Date administration of this medication is to cease: _____

Family physician's name: _____ **Phone:** _____

Parent/guardian's current work phone number: _____

Parent/guardian's current home phone number: _____

I give my permission for the above over-the-counter medication to be administered to my child.

Parent/guardian signature: _____ **Date:** _____

Each student must provide his/her own medication