

Mayfield City School District

Gates Mills • Highland Hts. • Mayfield Hts. • Mayfield Village

Dear parent or guardian:

It is the policy of the Mayfield Board of Education to discourage the administration of medication to students by school personnel. However, for students who require medication at school, written guidelines must be given to the parents, a written request from the physician must be on file in the school office, and a signed parent permission form must be submitted to the building before any medication can be administered in school. If your child must have medication of any type given during school hours, including over-the-counter drugs, the following requirements must be met:

- Obtain a copy of the "Authorization for Medication to be Taken During School Hours" from the school clinic or the school secretary.
- Parent must complete and sign the top portion
- The bottom portion must be filled out completely by the child's doctor for either prescription or nonprescription drugs, signed and stamped by the doctor. This must be renewed at the start of each school year.
- The completed form must be returned to the school before the first dose of medication can be given. This form will be kept on file at school.
- Parents must deliver the medication to the school unless prior arrangements have been made. Please note: certain medications need to be counted upon presentation to the school. If you have questions call your health clinic.

Medication will be given only from original and properly labeled containers. In the instance of prescription medications, a pharmacy-labeled container is required which includes:

- the student's name
- name of drug
- strength supplied
- dosage
- time interval date of expiration

The pharmacy label directions must match the doctor's prescription order. Ask the pharmacist for a second properly labeled container for use at school, if needed.

When the medication to be given is an over-the-counter type, the container must have:

- manufacturer's label identifying the medication and dosing
- the student's name

*****If the medication dose or time is changed, the above steps must be repeated. ******