

MUSTANG PUBLIC SCHOOLS 2018-2019

MEDICATION ADMINISTRATION RECORD

NAME OF STUDENT: _____ GRADE: _____ TEACHER: _____ DATE OF BIRTH: _____ TIME TO GIVE MEDICATION: _____ EXACT DOSAGE: _____
 AGE: _____ MEDICATION: _____ START DATE: _____ END DATE: _____ PURPOSE: _____ EXPIRATION DATE: _____
 PRESCRIBING PHYSICIAN: _____ PHYSICIAN'S PHONE: _____ MEDICATION ALLERGY: _____

I have received, read and understand the Mustang Public Schools medication policy. I give permission for the Mustang Public School staff to administer medication according to the directions. I give Permission for School Nurse to contact the Physician regarding the diagnosis related to the medication and for clarification of medications orders.

Parent/Guardian Signature _____ Date: _____ Phone Number: _____

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
AUG				\	\						\	\	PD	PD	PD			\	\						\	\					
SEP	\	\	H					\	\					PD	\	\	PD					\	\						\	\	\
OCT						\	\						\	\			FB	FB	FB	\	\							\	\		
NOV			\	\						\	\						\	\	H	H	H	H	H	\	\					\	
DEC	\	\					\	\							\	\						\	\	H	H	H	H	H	\	\	H
JAN	H	H	H	H	\	\					\	\						\	\	H					\	\					
FEB		\	\					\	\							\	\	PD					\	\				\	\	\	
MAR		\	\					\	\					SB	\	\	SB	SB	SB	SB	SB	SB	\	\				\	\	\	
APR						\	\					\	\							\	\						\	\		\	
MAY				\	\						\	\					\	\							\	\		H			

JUN 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

CODE: A=ABSENT NM=NO MEDICINE R=REFUSED D/C=DISCONTINUED H=HOLIDAY W=DOSE WITHHELD NS=NO SHOW SD=SNOW DAY IR=INDOOR RECESS FT=FIELD TRIP

INITIAL PERSON ADMINISTERING MEDICINE INITIAL PERSON ADMINISTERING MEDICINE INITIAL PERSON ADMINISTERING MEDICINE

STUDENT NAME: _____

MEDICATION SIDE EFFECTS OR SPECIAL INSTRUCTIONS: _____

DATE	MEDICATION	QUANTITY RECEIVED	QUANTITY RETURNED	PHARMACY	PRESCRIPTION #	INITIALS	DATE	WEEKLY COUNT	INITIALS
								1	
								2	
								3	
								4	
								5	
								6	
								7	
								8	
								9	
								10	
								11	
								12	
								13	
								14	
								15	
								16	
								17	
								18	
								19	
								20	
								21	
								22	
								23	
								24	
								25	
								26	
								27	
								28	
								29	
								30	
								31	
								32	
								33	
								34	
								35	

PROGRESS NOTES/ COMMUNICATIONS