

Parkview School District

106 W. Church Street – P.O. Box 250 Pho Orfordville, WI 53576-0250 F WEB Site: www.parkview.k12.wi.us

Phone: 608-879-2717 Fax: 608-879-2732

Dear Parents/Guardians:

When school staff is involved in dispensing medications to your child, the following guidelines must be followed to ensure that all medications are given in a safe manner in accordance with policies and procedures of the Parkview School District and the guidelines provided by the Department of Public Instruction.

## **Non-Prescription Medications**

- A Medication Administration Form must be completed and signed by the parent/guardian. (Please see reverse side)
- Medications must be supplied by the parent/guardian and be labeled in the original container.

## **Prescription Medications**

- A Medication Administration Form must be completed and signed by <u>BOTH</u> the parent/guardian and the student's health care provider for all prescription medications.
- Medications must be supplied by the parent/guardian and be in the original container and labeled with the student's full name, name of the drug and dosage, time to be given, and the health care provider's name. If medication is also administered at home, please ask the pharmacist for an extra bottle and label for the medication at school.
- School staff cannot split medication tablets. If your child's medication requires a half dose, please bring the medication to school already split.
- The directions on the medication container must match the written instructions of the health care provider.

Thank you for your attention to this important matter. If you have any questions and/or concerns, please feel free to contact Parkview School District to speak with the nurse.