

San Ramon Valley Unified School District

699 Old Orchard Drive • Danville, California 94526 www.srvusd.net • 925-552-5500

School	Fax #:
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Medication at School (Form B)

Student: Date of Birth:		rth:
School:	Grade:	Date:
A Parent Or Adult Representative Must Br and parent or guardian must sign this form		
SECTION ONE: To be completed by your m	nedical provider	
Diagnosis:		
Name of Medication:		
Form of medication: Tablet/Capsule	Liquid 🗖 Inhaler 🗇 Injection 🗗 Neb	oulizer 🗖 Other
Administration Instructions: Dose:	Frequency	Time:
Special Storage requirements: ☐ None ☐	Refrigerate Other:	
Restrictions or Significant Side Effects: □	None anticipated Yes. Describe	
Name of Medical Provider:	Signature:	
Address:	Phone: _	Date:
Notes:		
SECTION TWO: To be completed by the pa	-	
I given permission for (name of student) _ (or other school sponsored activities) according to the school sponsored activities.		_ to receive the above medication at schoo ifornia Ed Code.
Signature:	Relationship to student:	Date:
SECTION THREE: Permission to carry an a by your medical provider is required for you		ne auto injectors. Completion of this section
The above named student has been instruction. The student's well-being is in jeopardy unle		
Medication: □ Asthma Inhaler □ Epineph	rine Auto Injector	
Medical Provider Signature:		Date:
Parent Signature:		Date:
☐ I permit my child to carry the above-listed as		

FORM B: Updated March 2023

Information Administration of Medication at School

If your child is under the care of a physician and must take medication during the school day for a specific medical diagnosis or condition, please read the information below. This information pertains to both prescription and over-the-counter (OTC) medication.

The district's school nurses serve several schools and are not available daily to administer medication. As a result, nonmedical staff on the campus will most often perform this function. If possible, please consider having your student take medication before school.

If your child must take medication at school, please note the following:

- The Medication at School form must be completed each year and kept on file in the school office. You are required to submit a new form annually.
- A student may not possess any medication (prescription or OTC) at school, walking to and from school, or on a school bus (except inhaled asthma medication and epinephrine auto-injectors when authorized by the physician on this form).
- A parent or adult representative must bring medication to school in the original pharmacy container.
- Over-the-counter drugs must also have a Medication at School form on file.

Storage of medication will be in the nurse's office. The medication can be held in the classroom if needed. Students must have parental permission and medical authorization to carry their medications (see section three on the front side of this form). Students are only allowed to carry an asthma inhaler or an epinephrine auto-injector.

- Parents must submit updated Medication at School forms yearly or with a dosage change.
- At the end of the school year or when a medication expires, a parent or adult representative must pick up unused medicine.
- All medication is discarded if not picked up during the last month of school.
- A student may be subject to disciplinary action for misusing any medication.

Educational Code 49423 & 49423.1

- (a) During the regular school day, any pupil required to take medication prescribed for them by a physician may be assisted by the school nurse or other designated school personnel.

 (b)
 - (1) For a pupil to be assisted by a school nurse or other designated school personnel pursuant to subdivision, the
 school district shall obtain both a written statement from the physician detailing the name of the medication,
 method, amount, and time schedules by which the medication is to be taken and a written statement from the
 parent, foster parent, or guardian of the pupil indicating the desire that the school district assist the pupil in the
 matters set forth in the statement of the physician.
 - (2) For a pupil to carry and self-administer prescription auto-injectable epinephrine or inhaled asthma medication, the school district shall obtain both a written statement from the physician detailing the name of the medication, method, amount, and time schedules by which the medication is to be taken and confirming that the pupil is able to self-administer auto-injectable epinephrine or inhaled asthma medication, and a written statement from the parent, foster parent, or guardian of the pupil, consenting to the self-administration, providing a release for the school nurse or other designated school personnel to consult with the health care provider of the pupil regarding any questions that may arise with regard to the medication, and releasing the school district and school personnel from civil liability.
 - (3) The written statements shall be provided at least annually and more frequently if there are any changes to the medication, dosage, or frequency of administration.

(c) A pupil may be subject to disciplinary action pursuant to Section 48900, if that pupil uses auto-injectable epinephrine or inhaled asthma medication in a manner other than as prescribed.

For further information or assistance, contact your school or the health educator/school nurse