



# St Edmund's Catholic Primary School

**Head Teacher: Mrs C Moreland**  
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## Administering Medicine in School Consent Form

We realise that some children require medication in school, as prescribed by their doctors. The following details are essential if you are requesting us to administer medicines.

Child's name:..... Class: .....

Child's medical condition: .....

.....

Name of Medication to be administered by staff: .....

Dosage: .....

Time of Dosage: .....

### **Please note:**

- **The school can only administer medicines prescribed by a hospital or GP.**
- Please ensure that the medication/equipment is clearly marked with the child's name and the relevant dosage.
- It is the parents' responsibility to ensure that medication has not expired and that all equipment and devices are cleaned and kept in good working order.
- It is the parents' responsibility to advise the school in writing of any changes to the dosage and/or medication and provide evidence of the changes from the GP or hospital.
- All medicine must be handed into the school office and it is the parent's responsibility to collect at the end of the day.

### **Permission:**

I give permission to the school to administer the above medication during school hours.

I understand that the school will endeavour to give my child the medication at the set time, but the school is not held responsible if there is a delay in your child being administered the medication. If there is a delay you will be informed when you collect the medicine and your child from school.

If no issues are raised, this form will be shredded one month after the final dose of medicine is administered.

Signature of parent/guardian..... Date: .....