

DiAnne Boyd, RN

School Nurse – Heritage Schools Dist. #8

Dear Parent or Guardian:

Attached you will find two forms that I ask you to look over, and fill them out as they apply to your child.

Medical History: If your child has any medical history of illness, allergies, disorders etc. please fill this form out so that the staff and I can become aware of any conditions that may need our attention at school.

****Tylenol / Ibuprofen:** If you feel your child may need an OTC analgesic during the school year for any reason, we ask that you fill out the medication Authorization form and sign it. Along with the form, please provide the OTC medication in the properly labeled bottle. The medication should be kept in the office for safe keeping and dispensed by someone from the office staff.

Medication Authorization Forms: If your child requires taking a prescription medication on a daily basis at school, please read over this form and have the Doctor fill it out completely, then return it to the office with the medication. The medication must be labeled correctly with your child's name, medication, dose and time to be given at school. If your child's medication and or dose changes during the course of the year, your doctor will need to fill out a new form, and it will need to be returned to school.

Inhalers for Asthma: If your child uses an inhaler for an asthmatic condition, the State requires that the parent sends a written note by them, stating that their child will be using an inhaler at school. The inhaler needs to be kept in the box from the pharmacy with the student's name, medication identified, and instructions of use. If you prefer that your student carry their inhaler themselves, please indicate this in your note.