

FUQUA SCHOOL

P.O. Drawer 328
605 Fuqua Drive
Farmville, Virginia 23901
(434)392-4131 (800) 214-3460

MEDICATION RELEASE

For Lower School Students:

All medications must be hand-delivered to the School by the parent/guardian or an adult designated by the parent unless other arrangements are made with the Lower School Dean. Prescription medications must be sent to school in their original containers and be clearly labeled by the pharmacist. No expired medications will be administered.

The parent/guardian is responsible for submitting doctor's orders to the School *each time* there is a change of medication, dosage, or time of administration. Under no circumstances may a School staff member administer a prescribed medication without a doctor's order. Tylenol, Motrin, and Benadryl may be given as a one-time dose to students in grades K-5 with oral or written permission from the parent/guardian. For FSEL students, any medication administered must be accompanied by a physician's order.

Medication Authorizations are available from the Lower School Office.

Please indicate any/all items which when necessary, may be used for your child:

I authorize the Fuqua School staff to use the following items as part of basic first-aid care for my child,
_____, who is in grade _____.

- | | |
|---|---|
| <input type="checkbox"/> Hydrogen Peroxide/First Aid Spray | <input type="checkbox"/> Sterile Eye Drops (redness/allergy relief) |
| <input type="checkbox"/> First Aid Antibiotic Ointment | <input type="checkbox"/> Baking Soda/Vinegar Paste/Chiggerex Plus |
| <input type="checkbox"/> Calamine Lotion | <input type="checkbox"/> Nasal Spray |
| <input type="checkbox"/> Cough Drops/Cough Syrup/Throat Spray | <input type="checkbox"/> Chewable Antacid Tabs |
| <input type="checkbox"/> Anbesol, Jr. | <input type="checkbox"/> Children's Daytime Cough/Cold |

I give permission for my child to have one dose a day of tylenol or motrin when needed without being contacted by the school nurse. yes* no, please call first

**Please note: A parent will be contacted should a child request medication first thing in the morning to ensure a dose has not been administered prior to coming to school.*

√ _____

Parent/Guardian Signature

Date