

- Medication **MUST** be in the original packaging and clearly labelled with the Child's name, the prescribing dosage and the medication's used by date.
- Medication will not be administered without written authorisation from an authorised parent / guardian.
- Non prescribed medication can only be administered if accompanied by a letter from a Medical Practitioner detailing Practitioners' name and signature, child's name, date, name of medication, reason for medication, time to be given and dosage.

Child details

Date:

Child's Full name: Date of birth:/...../.....

Medication Details:

Name (s) of Medication to be administered: .			
Dispensary Date			
Used by date of medication			
Dosage			
Specific Instructions (i.e with food)			
Under specific circumstances			

Please ensure that all medication is removed from your child's bag and given to your educator.

Parent / Guardian's Name: Signature:

Child's Name

For children who require medication for more than one day consecutively the following table can be completed for a period of one week only:

To be completed by the parent/guardian							To be completed by the educator when administered								
Name of medication	Last administered		To be administered (or circumstances to be administered)		Dosage to be administered	Method of administration	Signature of parent/Guardian	Medication administered		Dosage Administration	Method of administration	Name of educator administering	Signature of educator administering	Name of witness	Signature of witness
	Time	Date	Time	Date				Time	Date						

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