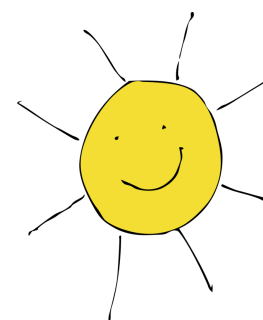


The Old School House Nursery @ Sancton

Administration of Medicine Consent Form

Statutory guidance for Early Years settings states that medicines must not usually be administered unless they have been prescribed for a child by a doctor, dentist, nurse or pharmacist and that **medicines containing aspirin** should only be given if prescribed by a doctor.



Ideally all medicines should be given by the child's parents. Our staff will only administer medicines if absolutely necessary and only after 48 hours of the medication has been started.

Before requesting our staff to administer medicine to your child, please consider if there is an alternative.

Details of administration

Child's full name		Date of birth	
Medicine to be administered		Type	Prescription
When should this medicine be administered? Time of day OR Specific circumstances in which it should be administered – describe in full			
Dose			
How should it be administered? Give full details of exactly how it should be given.			
End date The last date it should be given?			
Side effects to look out for			

Any other instructions or notes	

Parental consent – please sign to confirm your consent to the medicine being administered by nursery staff

I was directed to use this medicine for my child by a qualified pharmacist, doctor, nurse or dentist.	
I have administered this medicine to my child before with no adverse effects.	
I know the expiry date of the medicine I have provided and will provide a replacement before that date.	
This medicine does not contain aspirin.	
This medication is in the original packaging with your child's name, instruction and date clearly shown.	
Name of prescribing doctor	
Name and address of clinic or GP practice	
Parent full name	Date
Parents Signature	Date
In the event of an emergency I can be contacted on the following number	
Telephone Number:	