

## Instructions for Completing Medication Authorization Form

All prescription and over-the counter medications are kept locked in the health center and will be administered only as authorized by the parent and child's physician. **Important: we cannot administer any medication you send for your child without this signed form.**

Steps to complete the Medication Authorization Form:

1. Medication **must** be prescribed by a California licensed physician. Medications from Mexico or authorizations from Mexican physicians are not allowed by law.
2. Prescription medication must be provided in the original container labeled by a **California pharmacist**, non-prescription medication must be provided in the original container.
3. All medication, both prescription and non-prescription, require a physician's signature, medical license number and complete (legible) instructions from the physician.
4. Verify that all medications are properly labeled:
  - a. medications are in their **original containers**
  - b. prescription medications are properly labeled by the California pharmacy, including:
    - 1) student's name (**prescription must be for the student only, no other name will be accepted**)
    - 2) medication name
    - 3) precise dosage instructions, quantity and frequency
    - 4) physician's name
    - 5) school's initials; example "Twin Peaks" would be T.P.
  - c. non-prescription medications are properly labeled, including:
    - 1) manufacturer's label with the medication name, dosage, and instructions
    - 2) add your child's name (first, last and initial) and the school's initials (e.g., Twin Peaks would be "TP") **example:** Amanda C. Garcia ("TP")
  - d. Spanish labels must be translated to English on the Authorization Form
  - e. Medications are not expired.
5. Fold this form and place it in a zip-lock baggie with all the medications (both prescription and non-prescription in **original containers**) and forward the bag to your child's school as directed by their school.
  - a. Label the baggie with your child's full name and school initials (use masking tape).
  - b. **DO NOT** send any medication to the site in your child's suitcase.
  - c. Homeopathic, herbs, and vitamins **require** a medical authorization form completed by your physician.

If you have any questions regarding your child's medication or these instructions, please contact your school or the Outdoor Education Program Nurse at the site your child is scheduled to attend:

Cuyamaca Outdoor School: (760) 765-3004, or (760) 765-3000 if no answer FAX: (760) 765-3001

Fox Outdoor School: (760) 782-4100, or (619) 296-8935 if no answer FAX: (760) 782-4101

Thank you for your cooperation and help. We appreciate your time to complete this form. It is important information that will help make your child's experience safe and enjoyable!