



WORCESTER CENTRAL SCHOOL

198 Main St., Worcester, NY 12197
Phone (607) 397-8785 • Fax (607) 397-9454
www.worcestercs.org

Dear Parents/Guardians,

Date_____

According to New York State Education Law, medications can be given during school hours if the school nurse is provided with both a written order from a NYS provider and written permission from the student's parent or guardian. **Prescribed medications must be in a labeled pharmacy bottle provided by the pharmacist.** Over the counter medications must be in the original container with the original label.

Students are not allowed to carry their own medications. If the provider indicates the student can self carry medications, we must have a written order with required attestation from this provider. Education Law 19 permits students to independently carry and use their own inhaled respiratory rescue medication, epinephrine auto-injector, or insulin,glucagon and related diabetes management supplies. The student cannot share their medications as a number of our students may be allergic to various medications and the result could be life threatening.

Administration of Medications During School Hours:

Provider please complete:

1. Student's name: _____
2. Name of medication: _____
3. Dosage and time to be given: _____

YES_____or NO_____ This student is allowed to carry their inhaler,epipen, or insulin,glucagon and diabetic supplies while in school. They have been instructed in the purpose, method, frequency and use of this medication. It is understood that if they act irresponsibly with their medication, they will no longer be allowed this privilege.

Provider Signature _____ Phone number _____

Parent or Guardian please complete:

- If my child has been prescribed Albuterol I give permission to use the school's stock Albuterol in the event the student's is not available or empty.
- I give permission for the school nurse to administer the medication as prescribed by the provider to _____ (students name)

_____(Parent/Guardian) _____(Date)