

Summer @Carroll

2010 Authorization to Administer Medication: Staff under age 18

Student Name: _____

Parent/Guardian: _____

Emergency Telephone Number: _____

Name of Licensed Prescriber: _____ Phone: _____

We follow the Massachusetts state guidelines for the storage and administration of all medications that are brought to Summer@Carroll. This completed and signed form must be on file before any medication is administered to your child. This includes all prescription drugs, non-prescription drugs, over-the-counter medicines, vitamins, inhalers, medicated creams, herbal remedies, etc. In addition, Massachusetts state law requires all medications to be kept in a locked storage facility.

Medication: _____ Dose: _____ Frequency: _____ Special Directions: _____
Medication: _____ Dose: _____ Frequency: _____ Special Directions: _____
Medication: _____ Dose: _____ Frequency: _____ Special Directions: _____

I authorized Summer@Carroll to administer to my child, _____, the medication described here, in accordance with 105 CMR 430.160 (Commonwealth of MA)

I do do not give permission for my son/daughter, if they have an inhaler, to self-administer his/her INHALER while at Summer@Carroll if the program nurse feels it is safe and appropriate.

I consent to have my child receive: (indicate each medication the nurse may administer per standing orders)
 Tylenol Advil Motrin Benadryl

Parent/Guardian Signature: _____ Date: _____

Printed Name: _____

105 CMR 430.160 A: Medication prescribed for campers shall be kept in original containers bearing the pharmacy label, which shows the date of filling, the pharmacy name and address, the filling pharmacist's initials, the serial number of the prescription, the name of the patient, the name of the prescribing practitioner, the name of the prescribed medication, directions for use, and cautionary statements, if any, contained in such prescription or required by law, and if tablets or capsules, the number in the container. All over-the-counter medication for campers shall be kept in the original containers containing the original label, which shall include the directions for use.

105 CMR 430.160 C: Medication shall only be administered by the health supervisor* or by a licensed health care professional authorized to administer prescription medications. The health care consultant shall acknowledge in writing the list of medications administered at the camp. If the health supervisor is not a licensed health care professional authorized to administer medications, the administration of medications shall be under the professional oversight of the health care consultant. Medication prescribed for campers brought from home shall only be administered if it is from the original container, and there is written permission for the parent/guardian.

105 CMR 430.160 D: When no longer needed, medications shall be returned to a parent or guardian whenever possible. If the medication cannot be returned, it shall be destroyed.

*Health Supervisor – A person who is at least 18 years of age, specially trained and certified in at least current American Red Cross First Aid (or its equivalent) and CPR, has been trained in the administration of medications, and is under the professional oversight of a licensed health care professional authorized to administer prescription medications.