



# THE JOHN CARROLL SCHOOL

## Medical Update and Discretionary Medication Consent Form

*This is the student's confidential medical record for the 2019-2020 Academic year.  
To be shared with Faculty/Staff if pertinent.*

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

List ALL Medications your student takes on a regular basis: \_\_\_\_\_

Reason for Medication(s): \_\_\_\_\_

**MEDICAL/HEALTH PROBLEMS:** Check all that apply:

Severe Allergy

Food \_\_\_\_\_

Insect \_\_\_\_\_

Medication \_\_\_\_\_

Is EpiPen needed? YES  NO

Diabetes

Seizure Disorder

Asthma

Is Rescue Inhaler needed? YES  NO

ADHD

Is Medication Taken? YES  NO

If so, What Medication \_\_\_\_\_

Other \_\_\_\_\_

**MEDICATION ADMINISTRATION:**

I give permission for my student to receive medication listed below from the School Nurse. I understand that a generic equivalent may be used.

**I would like the following medication(s) made available to my student. (Please Check)**

<p><b>For Upset Stomach:</b></p> <p><input type="checkbox"/> Chewable Antacid Tablets (Like Tums)</p>	<p><b>For Mild Allergic Reactions:</b></p> <p><input type="checkbox"/> Diphenhydramine (Like Benadryl)</p>
<p><b>For Cough/Sore Throat:</b></p> <p><input type="checkbox"/> Cough Drops</p>	<p><b>For Seasonal Allergies:</b></p> <p><input type="checkbox"/> Loratadine (Like Claritin)</p>
<p><b>For Headache/Fever/Other Discomfort</b></p> <p><input type="checkbox"/> Acetaminophen (Like Tylenol)      <input type="checkbox"/> Ibuprofen (Like Advil)</p>	
<p><input type="checkbox"/> I do <b>NOT</b> want any medication given to my student at school.</p>	

**PARENT/GUARDIAN INFORMATION:**

Mother: \_\_\_\_\_ (C): \_\_\_\_\_ (W): \_\_\_\_\_

Father: \_\_\_\_\_ (C): \_\_\_\_\_ (W): \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_

**IF PARENT/GUARDIAN CANNOT BE REACHED ONLY LISTED PERSONS WILL BE CONTACTED AND PERMITTED TO PICK UP STUDENT:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ (C): \_\_\_\_\_ (W): \_\_\_\_\_

**PARENT/GUARDIAN SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_