MIDDLE SCHOOL TRIP MEDICATION PROCEDURE

Dear Parent or Guardian,

If your child requires **ANY** medication (including allergy medication or only as needed medications) on the 7th grade environmental trip you **MUST** complete the <u>Medication Order Form</u> (page 2). Please bring this completed form to the health office with the appropriate medications in their original containers prior to the following deadlines:

September 25, 2019 for trip October 14-16, 2019 (Teams 7C & 7D) **October 2, 2019** for trip October 23-25, 2019 (Teams 7E & 7F) **October 7, 2019** for trip October 28-30, 2019 (Teams 7A & 7B)

The trip nurse must administer ALL medications including over the counter medications such as Advil, Motrin (Ibuprofen)/Tylenol (Acetaminophen) and allergy medications. The student *may not* carry or self-administer ANY medications other than asthma inhalers and EpiPens that have been cleared by the Health Office. A nurse will be available to administer medications during an overnight trip. It is requested that only those medications that are absolutely necessary be sent for administration by the nurse. Medications such as vitamins, which can be given at home the morning of departure and again the evening that the student returns, should <u>not</u> be sent on the trip. Any student found to be in possession of any medication not cleared by the Health Office will have the medication confiscated and may be subject to disciplinary action.

The school nurse will review medications listed by the parent on the Student Overnight Trip Application Form and/or Medication Order Form. Adequate time is needed to confirm and prepare medication lists for the trip nurse. All deadlines and instructions for medication drop off and pick up will be strictly adhered to.

Instructions:

- 1. Complete and sign the Overnight Trip Form and Medical Questionnaire Form.
- 2. If your child has any medications and orders already on file in the Health Office (i.e. epi-pen, asthma inhaler), those medications and orders will accompany the nurse on the trip. It is <u>not</u> necessary to complete the Medication Order Form again.
- 3. Medication Order Form is ONLY required for over the counter medications other than Advil, Motrin (Ibuprofen)/Tylenol (Acetaminophen) or prescription medications other than those with orders in the Health Office. <u>All paperwork must be filled out by the prescribing physician and accompany medication.</u>
- 4. It is not necessary to bring in Advil, Motrin (Ibuprofen)/Tylenol (Acetaminophen).
- 5. All medications must be brought directly into the Health Office by a parent, in the original pharmacy container, clearly labeled with the student's name, medication name and dosage.
- 6. Supply only the exact amount of medication to be administered on the trip and leave the remainder of medication at home.
- 7. <u>Pick up all unused medications no later than one week after the trip or the medication will be</u> <u>disposed of according to New Jersey State regulations.</u>

Should you have any questions concerning medications or health issues, please contact the Health Office directly at 908-231-8661 x-136.

FORM C

REQUIRED for over the counter medications other than Advil, Motrin (Ibuprofen)/Tylenol (Acetaminophen) or prescription medications other than those with orders in the Health Office

Bridgewater-Raritan Regional School District Medication Order Form for Overnight Trip

Medication Order Form for	J Overnight Hip				
Student Name:			Birth Date:		
School: Bridgewater-Raritan Middle School			Grade:		
Parent/Guardian Name:					
Home Address:					
Parent/Guardian Phone Number:	Home:	Work:	Cell:		
MEDICAL PROVIDER I	NFORMATION:				
Name of Physician:			Physician Stamp		
Address:					
Phone Number:					
MEDICATION	DOSE	ROUTE OF ADMINISTRATION	TIMES GIVEN	CONDITION BEING TREATED	

I request that the medication, named above, be given to my child. The medical provider explained to me the medication, its purpose and possible complications. I hereby acknowledge that the Bridgewater-Raritan Regional School District shall incur no liability as a result of any injury arising from the administration of this medication and hereby indemnify and hold harmless the Bridgewater-Raritan Regional Board of Education and its employees or agents from any claims arising out of the administration of this medication.

Parent/Guardian Signature:	Date:
Physician Signature:	Date:

PLEASE NOTE: This completed form, along with the medication must be brought to the school nurse by the parent/guardian or adult student. The medication must be in the original container appropriately labeled by the pharmacy or physician. Rev 1/19/17

SEE GUIDELINES ON OTHER SIDE

2 Medication Order Form

8th Grade Trip Medication Guidelines

The trip nurse must administer ALL medications including over the counter medications such as Advil, Motrin (Ibuprofen)/Tylenol (Acetaminophen) and allergy medications. The student *may not* carry or self-administer ANY medications other than asthma inhalers and epi-pens that have been cleared by the Health Office. It is requested that only those medications that are absolutely necessary be sent for administration by the nurse. Medications such as vitamins, which can be given at home the morning of departure and again the evening that the student returns, should <u>not</u> be sent on the trip. Any student found to be in possession of any medication not cleared by the Health Office will have the medication confiscated and may be subject to disciplinary action.

The school nurse will review medications listed by the parent on the Student Overnight Trip Application Form (Form B) and/or Medication Order Form (Form C). Adequate time is needed to confirm and prepare medication lists for the trip nurse. All deadlines and instructions for medication drop off and pick up will be strictly adhered to.

Instructions -

- 8. Complete and sign the Medical Questionnaire/Medications List on Form B pages 1 and 2 of the BRMS Student Overnight Trip Form.
- 9. If your child has any medications and orders already on file in the Health Office (i.e. epi-pen, asthma inhaler), those medications and orders will accompany the nurse on the trip. It is <u>not</u> necessary to complete the Medication Order Form (Form C) again.
- 10. Medication Order Form (Form C) is ONLY required for over the counter medications other than Advil, Motrin (Ibuprofen)/Tylenol (Acetaminophen) or prescription medications other than those with orders in the Health Office. <u>All paperwork must be filled out by the prescribing physician and accompany medication.</u>
- 11. All medications must be brought directly into the Health Office by a parent, in the original pharmacy container, clearly labeled with the student's name, medication name and dosage.
- 12. Supply only the exact amount of medication to be administered on the trip and leave the remainder of medication at home.
- 13. It is not necessary to bring in Advil, Motrin (Ibuprofen)/Tylenol (Acetaminophen).
- 14. Pick up all unused medications no later than one week after the trip or the medication will be disposed of according to New Jersey State regulations.

Should you have any questions concerning medications or health issues, please contact the Health Office directly at 908-231-8661 x-136.