

## Parental/carer consent to administer an 'OVER-THE-COUNTER' (OTC) medicine

All over the counter (OTC) medicines must be in the original container. **A separate form is required for each medicine.**

<b>Date</b>	
<b>Child's name</b>	
<b>Class</b>	
<b>Name of medicine</b>	
<b>Strength of medicine</b>	
<b>How much (dose) to be given. For example, One tablet, One 5ml spoonful</b>	
<b>At what time(s) the medication should be given</b>	
<b>Reason for medication</b>	
<b>Duration of medicine:</b> Please specify how long your child needs to take the medication for.	
Are there any possible side effects that the school needs to know about? If yes, please list them	

<b>Special Instructions</b>	
<b>Medicine to be left at school</b>	Yes / No
<b>Medicine to be taken home every day (e.g. antibiotics)</b>	Yes / No

I give my permission for the headteacher or the school's staff to administer the "over the counter" medicine to my son/daughter during the time he/she is at school. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped. I understand that it may be necessary for this medicine to be administered during educational visits and other out of school activities, as well as on the school premises. I also agree that I am responsible for collecting any unused or out of date medicines and returning them to the pharmacy for disposal and supplying new stock to the school, if necessary. The above information is, to the best of my knowledge, accurate at the time of writing.

<b>Parent/carer name</b>	
<b>Parent/carer signature</b>	
<b>Mobile Number of parent/carer</b>	