

HEALTH OFFICE

Phone: 732-827-5885 xt. 2120 Fax: 732-827-5456

AUTHORIZATION FOR OVER-THE-COUNTER MEDICATION

(No Prescription Necessary)

Permission allows the School Nurse to give the following non-prescription medications to my child during school hours. These medications are in stock in the Nurse's Office and approved by the School Physician:

- Acetaminophen (Tylenol) for headache, pain or fever Children's Liquid Children's Chewable Regular Strength Tablets – 1 or 2 tablets
- Ibuprofen (Motrin/Advil) for headache, pain or fever Children's Liquid Regular Strength Tablets – 1 or 2 tablets
- 3. Benadryl for allergy Children's Liquid (12.5 mg) Tablet or Capsule (12.5 mg /25 mg)
- 4. TUMS for upset stomach 1 or 2 chewable tablets
- 5. Cough Drops/Throat Lozenges for sore throats and/or coughs
- 6. Pepto-Bismol- for upset stomach, diarrhea, nausea, indigestion, heartburn
- 7. Epinephrine Auto-Injector for evidence of anaphylactic reaction
- 8. Naloxone Intranasal for evidence of Opioid Overdose (4 mg in each nostril)

***	Any	Medications	other	than	those	listed	above,	will	need	a	Physician's	Order,	and	the
med	icatio	n must be pro	vided	by yo	u, in tl	ne ORI	GINAL	cont	ainer.					

Student Name:	Date:
Parent Signature:	