RYDAL PENRHOS SCHOOL

REQUEST FOR PUPIL TO CARRY HIS/HER MEDICATION

This form must be completed by parents/guardians if they wish their child to carry his/her own medication in School.

Please Note: <u>PUPILS ARE NOT ALLOWED TO CARRY NON-PRESCRIPTION MEDICINES, HOMEOPATHIC, HERBAL OR ORIENTAL REMEDIES ON THEIR PERSON OR KEEP THEM IN THE BOARDING HOUSE</u>.

The School Health Centre provides a range of homely remedies for symptomatic relief of most minor ailments, these are also available in each boarding house. Therefore, there is no need for any pupil to bring anything into school other than prescription medicines. For the safety of all pupils **any non-prescription medicines brought into school will be confiscated and destroyed.** The School Homely Remedies list is available on request from the Health Centre.

Prescription Medication

Pupils are permitted to self-administer medicines that heave been prescribed for them by a doctor. However, in all cases the pupil must undergo a risk assessment by the Health Centre staff.

<u>All</u> medicines (including inhalers and EpiPens) brought into School **<u>must</u>** be in the original packaging and clearly labelled with the pupil's name, dose to be given and frequency of administration. Doctors instructions should be included if appropriate.

For the safety of all pupils, **medicines not correctly labelled will be confiscated and destroyed.**

Pupil name: …… D.O.B. ……

Class / Form: ……

Condition or Illness: ……..……

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Name of Medicine: Dose: Frequency/Time:

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I would like my son/daughter to keep his/her medication on him/her for use as necessary.

Signed: …….. Date: ….…….…….

Relationship to Child: ……..……

STAFF USE

Risk Assessment Undertaken

Date completed: …… Copy to House parent: YES / NO

Undertaken by ……

Outcome: ……...…..……