



MEDICATION INFORMATION REQUEST LETTER

Dear Provider:

At Orange County Head Start, we prioritize our participants' health and safety. Our records show that your patient may be in need of medication during school hours. Medications are rarely given in school. The only exceptions involve special or serious problems where it is deemed absolutely necessary to give the medication. We recognize that medical treatment is the responsibility of the parent and the family physician; therefore, we, OCHS staff, will follow written instructions as prescribed by the child's physician on the attached form and pharmacy label.

The following information is to notify you of our Medication Policy and Procedure. **We ask that you read this document thoroughly and complete the Parent/Guardian and Physician Request for Medication form attached.**

OCHS Medication Policy Information:

1. The parent is urged with the help of the family physician to work out a schedule of giving medication outside school hours. **Note: Medical personnel are not available at school.**
2. Specific directions for the administration of the medication to be given at school must be included in a written statement from the attending physician, clearly specifying the condition for which the drug is to be given, how it is to be given, dosage, and related information and supplied in the original bottle from pharmacy (see attached form).
3. Specific instructions should be included for the emergency treatment of allergic reactions such as those from bee stings, and they should clearly state what type of reaction for which the drug is being given; i.e. localized, generalized, severe, and mild.
4. Medication orders must be renewed by the attending physician and a release signed by the parents at the beginning of each school year or upon entrance to school and when medication regimen is changed.
5. All prescription medication must have an unaltered label by the pharmacist (**medication label's instruction must match physician's instructions provided on medication request form**).

Thank you for your cooperation,

OCHS Health Staff