Wolverine Community Schools

Home of the Wildcats

wolverineschools.org
Phone: (231) 525-8201
Fax: (231) 525-8251

I. PRESCRIPTION MEDICATION

A. Authorization to Administer Medication

All prescription medication to be given in school must be ordered by a licensed healthcare provider authorized to prescribe medication. In Michigan, an authorized prescriber is a licensed dentist, a licensed doctor of medicine, a licensed doctor of osteopathic medicine and surgery, a licensed doctor of podiatric medicine and surgery, or a licensed optometrist. Nurse practitioners and physician assistants can prescribe under delegation of MD or DO. An approved medication administration/authorization form (see Appendix) should be used and should contain the following information:

https://www.michigan.gov/-/media/Project/Websites/mde/Year/2017/01/24/Medication_Administration_Model_SN_Guideline_FINAL_7-22-13.pdf?rev=7ba89b272ac14ad28535ddb7f82b098b

Name of Student:	
Date of order:	
Diagnosis:	
Name of medication to be administered:	
Dosage:	
Time of administration:	
Duration of the medication order:	
Possible side effects:	
Special requirements such as “take with food”	
Whether or not medication may be self-administered	

(Primary Care Doctor/Physician) Name and title (Print)

Signature (Primary Care Doctor/Physician) Date