

ENGADINE PUBLIC SCHOOL

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Permission to Administer Medication/Support at School

In line with DEC Policy schools can no longer administer <u>short turn medications</u> like antibiotics, ear drops, panadol, etc.

I hereby give permission for Engadine Pubic School to administer the below long term medication prescribed by our doctor, as per the instructions given herewith: Name of Student: _____ Class: _____ Name of Condition: Symptoms: _____ Name of Medication: Dosage to be given: Time to be given: How is it administered? Crushed Taken whole Other (give details) Please provide a personal crusher, if required. Half or quarter tablets must be precut by parent. Please note that all medications must be provided in the original chemist's packaging stating the correct dosage, name of child and medication presribed by the doctor. Authorisation by parent/caregiver: Date: _____

