



St. Paul the Apostle Catholic School  
61 Moss Road  
Westerville, Ohio 43082  
Phone: 614-882-2710



## Medication Information

In compliance of the Ohio Revised Code section 3313.713, the Catholic Diocese Policy 5141.0 and the St. Paul School Medication Policy in the St. Paul School Handbook, students are supervised by St. Paul school nurse/faculty/staff in the administration of ANY medication, prescription or non-prescription (including Tylenol/acetaminophen, Motrin/Advil/ibuprofen, Benadryl, vitamins, food supplements, cough drops, throat lozenges). No aspirin or products containing aspirin will be administered to students because of its connection to Reye's Syndrome. **Parents or guardians and the physician's written permission with original NOT stamped signatures (NO FAXES)** are necessary on the *Request to Administer Medication to a Student During School Hours* form for medications to be taken during school hours. **ONLY PHYSICIANS ARE TO COMPLETE THE PHYSICIAN SECTION.** The physician section must be completed thoroughly and accurately.

**All medications must have a dose. Liquid medication dosages must be stated in mg. NOT teaspoons or ml's. Epinephrine injections must be stated in mg., either 0.15 mg or 0.3 mg. Pills must be stated in mg. or a specific unit of measure NOT 1 pill or 2 pills, etc. All medication must have a route such oral, IM, topical, inhaler, etc. All medications must have a specific frequency such as every 4 hours as needed (prn) and diagnosis/reason for administration. All medication forms must have a start date and expiration date (new completed medications forms are required for each school year).**

**Example: Motrin 200 mg every 8 hours as needed for a headache.**

**ONE MEDICATION PER FORM.**

**PLEASE CHECK YOUR COMPLETED MEDICATION FORMS THOROUGHLY BEFORE YOU LEAVE THE PHYSICIAN'S OFFICE.**

Medication must be in original prescription and/or non-prescription containers. The label on the medication container **must** match the order written by the **prescribing** physician on the *Request to Administer Medication to a Student During School Hours* form. Please check the medication expiration date as **no expired medication will be accepted.**

Watch for recalls for medication and notify the clinic if a medication has been recalled. Make sure to note when your medication expires and send a replacement to the clinic when it does expire.

The law allows students to self-carry Epinephrine Auto-Injectors and Asthma inhalers. Additional forms are required for these medications. The student must be properly trained to self-administer. For Epinephrine Auto-Injectors, if a student chooses to self-carry, an additional Epinephrine Auto-Injector **must** be provided to the school. It is also recommended for students carrying inhalers, that an additional inhaler be provided to the school. These medications will be kept in the clinic.

Forms can be obtained from Mrs. Johnson, M.S., R.N., School Nurse in the clinic. For any questions regarding medications, please call Mrs. Johnson at 614-882-6892 or email to [bjohnson@cdeducation.org](mailto:bjohnson@cdeducation.org).