

MANHATTAN BEACH UNIFIED SCHOOL DISTRICT
HEALTH SERVICES DEPARTMENT

REGULATIONS ON THE ADMINISTRATION OF MEDICATION DURING SCHOOL HOURS (Ed. Code 49423)

No pupil shall be given medications during school hours except upon the written request from an authorized health care provider (an individual licensed by the State of California to prescribe medication) who has the responsibility for the medical management of the pupil. All such requests must be signed by the parent or guardian. The term medication includes over-the-counter remedies, nutritional supplements, herbal remedies, topical creams and any substance dispensed by prescription.

All medication must be brought to the health/school office by the parent or guardian. No medication may be brought to school by pupils or on the school bus.

Parents or guardians shall be encouraged to cooperate with the physician to develop a schedule so that the necessity for taking medications at school will be minimized or eliminated.

Parents and guardians will assume full responsibility for the supplying of all medications.

A "Request for Medication to Be Taken during School Hours" form must be completed by the pupil's physician, signed by the parent or guardian and filed with the health office. A new form must be completed each school year.

The container must be clearly labeled with the following information:

Pupil's full name
Physician's name
Physician's telephone number
Name of medication
Dosage, schedule and dose form
Date of expiration of prescription

Each medication is to be in a separate container labeled as above.

All liquid medication must be accompanied by an appropriate measuring device.

Any tablets requiring partial doses (1/2 or 1/4) must be cut at home/pharmacy.

Over-the-counter medications must be properly labeled and in the original manufacturer container.

The district will dispose of outdated or unused medication in accordance with federal and state laws if the medication is not retrieved by the parent at the end of the school year.

This request is valid for the **current school year**. Whenever there is a change in medication, dose, time, route or prescribing physician, the parent(s) and physician **must complete a new form**.