



MEDICATION AUTHORIZATION FOR CMS STUDENTS

School Name	School Phone #	For School Use Only
		Date Received/Receiver's Signature
If submitting by fax: 704-432-2079 (School Health)		Medication Received? yes no
Student's Name (Please print.)	Student's Date of Birth	Date Approved/Nurse's Signature
		Entered in EHR? yes no

Written parent/guardian consent and an order from a healthcare provider licensed in North Carolina are required for administering prescription and over-the-counter medications at school (CMS Policy JLCD/Regulation JLCD-R). Contact the school nurse for help if relocating from another state with orders from an out-of-state provider. Some medications may not be suitable for a school setting. Additional documentation may be required for some medications (examples: research medications, medications with potential for immediate serious side effects). Contact the school nurse if you have questions.

SECTION 1: LICENSED HEALTHCARE PROVIDER AUTHORIZATION

When possible, medications should be taken before or after school. Administration of non-prescription medications at school is discouraged. CMS action plans for asthma, diabetes, seizure disorders and severe allergies may be used instead of this form. See CMS Coordinated School Health webpage.



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