

MEQUON-THIENSVILLE SCHOOL DISTRICT


5000 West Mequon Road
Mequon, Wisconsin 53092

Demond A. Means, Ed.D., Superintendent
Eric J. Dimmitt, Director of Curriculum, Instruction & Assessment
Hughes B. George, Ph.D., Director of Pupil Services
Gail M. Grieger, Business Manager

MEMORANDUM

July 2011

TO: Parents of All Public School Children and Area Physicians

FROM: Hughes B. George, Director of Pupil Services 

RE: Dispensing Medications in the Schools

Each year we are asked to dispense medications to certain students who are temporarily ill and/or under the care of a physician. Wisconsin law allows designated school district employees to dispense medication(s) ONLY if certain procedures are followed. To reduce the possibility of individual students taking medication without parental knowledge, to comply with requirements of the law, and to increase the safety of students in school, the attached procedures have been established.

For a child to take medication(s) during the school day, please:

1. Complete school dispensing consent form (see reverse side)
 - For Over-the-Counter medications, only parent's consent is required.
 - For prescription medication(s), parent consent and physician authorization is required.
 - For carrying epi-pen or asthma inhaler with student at school, physician initials.
2. A. **PRESCRIPTION MEDICATION MUST BE IN THE ORIGINAL PRESCRIPTION CONTAINER**, clearly labeled with the name of the student, name and dosage of the medication, method of dispensation, time of day to be given, name of physician, date issued, pharmacy name, address, and phone number. **ALL MEDICATION FOR STUDENTS K-8 MUST BE BROUGHT TO THE SCHOOL BY A PARENT OR LEGAL GUARDIAN. ALL MEDICATIONS MUST BE KEPT IN THE SCHOOL OFFICE, UNLESS PHYSICIAN HAS GIVEN ORDERS TO CARRY WITH STUDENT.** It will not be dispensed without physician **AND** parent consent.
- B. **OVER-THE-COUNTER MEDICATIONS MUST BE IN ORIGINAL BOTTLE OR PACKAGING.** It will **NOT** be dispensed without written permission by the student's parent/guardian and the instruction.

Please note that we have included space on the form for the physician to ask us to watch the student's behavior, condition or reactions to the medication. School staff would be glad to help monitor the student and provide feedback if requested.

- C. Please pick up any remaining medications at the end of the school year. If medications have not been picked up by the last day of school the medications left will be properly discarded.

We appreciate your cooperation. If you have any questions/concerns, please feel free to call me at (262)238-8501.

