MANSFIELD MIDDLE SCHOOL
SCHOOL HEALTH SERVICES

ACETAMINOPHEN/IBUPROFEN MEDICATION RECORD

Student's Name _____ **Grade** _____

Other medications my child is taking _____

Allergies to Medications _____

Under the standing orders of the medical advisor, Acetaminophen (generic form of Tylenol) or Ibuprofen (generic form of Advil) may be given to students with parent's authorization. Acetaminophen or Ibuprofen may be administered by mouth for symptoms of toothache, dental brace discomfort, menstrual cramps, simple headaches, and fever.

Students <u>may not</u> receive Acetaminophen or Ibuprofen for muscle aches, colds, or swollen joints under the standing order. Complaints such as these require a written order from the student's private physician.

Only one dose will be administered during the school day up to twice in one week. If the student continues to be uncomfortable, the parent/guardian will be contacted regarding the necessity of a medical evaluation.

I give Mansfield Middle School permission to administer (Check one or both) ☐ **ACETAMINOPHEN** ☐ **IBUPROFEN** to my above named child as needed. No allergy to this medication is presently known. I will notify the school nurse if, at any time in the future, my child should not receive this medication. This permission is in effect until the end of the school year.

_____ _____

Parent/Guardian Signature **Date**

Date	Time Given	Medication Type Aceta.	Ibupro.	Dose Given	Signature of Nurse	Comments

Revised 6/01