

2100 Greenfield Drive, El Cajon, CA 92019 | 619-201-8800

POLICY REGARDING MEDICATION

In compliance with general procedures for school offices and for the safety of your child(ren), we are limiting our care for students to cleaning and bandaging minor scrapes. For any other medical problems, including temperatures that are above normal, parents will be called to make arrangements for students to be picked up from school. In the case of an emergency, paramedics and parents will be called. All medications administered at school must be prescribed by a physician even if they are sold over the counter i.e. aspirin, acetaminophen, ibuprofen, antacids, cough drops, etc. All medications (prescribed or over the counter) shall be stored in its originally received container. *

* Cali	fornia E	Education Co	de	<u>}</u>									
THIS	FORM	REQUIRES	A	PHYSICIAN'S	SIGNATURE.	Please	use	this	form	when	sending	prescription	and
non-p	orescrip	tion medica	tio	n to the schoo	l office.								

CHRISTIAN UNIFIED SCHOOLS OF SAN DIEGO

Administration of	Medications Form (Education	Code Section 49423)	
Date:	Student:	Grade:	
Please administer	this medication(s) of		
		to the above-named student	
Amount:	Time:	Schedule:	
Amount:	Time:	Schedule:	
Additional Instruc	etions:		
Physician's Signat	cure:		
_	e: formation the school should kn	OW:	
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