

Maryland Department of Human Resources Child Care Administration **Medication Order Form**

Regulations permit childcare providers to give prescription and non-prescription medications to children in care under certain conditions. Prior written permission from the child's parent is a requirement. If possible, arrange the time of the dosage so the child receives the medication at home. Fill out separate form for each prescription or non-prescription drug.

NON-PRESCRIPTION MEDICATION A child may receive only one dose per illness, except acetaminophen (Tylenol) and topical medication. A licensed health practitioner must approve the medication and dosage for the child to receive more than one dose.

PRESCRIPTION MEDICATION Prescription medication must be in a container labeled by the pharmacy or physician with the child's name and expiration date. The child may receive medication only according to the written instructions of the health practitioner or the instructions on the medication label.

Name of Child _____

This medication is being given for the following condition(s) _____

MEDICATION	DOSAGE	HOUR GIVEN	DATES to ADMINISTER	
			Start	Stop

Additional Directions _____

I/We authorize _____ the Columbia Association to administer the above medication to my/our child.

Signature of Parent

Date

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COMPLETE ONLY IF NECESSARY

Instructions for more than one dose of a non-prescription medication _____

Instructions for **prescription** medication, if different from instructions on label; _____

Note any side effects of this medication; _____

Note any reasons or conditions when this medication should be stopped or not given _____

Signature of Health Practitioner

Date

Printed Name of Health Practitioner

Phone Number

If the health practitioner does not sign this section, oral permission from the health practitioner is required. Complete the following.

Name of the person receiving approval from health practitioner

Date and Time

