

Medication Administration

Regulation 3270.133 of the Commonwealth of Pennsylvania Regulations for Child Care Centers states:

“Facility persons are not required to administer child medication or special diets which are requested or required by the parent, a physician, or a CRNP. If child medication or special diets are administered, the following requirements apply:

1. A prescription or non-prescription medication may be accepted ONLY in an ORIGINAL container. The medication shall remain in the container in which it was received.
2. A staff person shall administer a prescription medication ONLY if written instructions are provided from the individual who prescribed the medicine. Instructions for administration contained on a prescription label are acceptable.
3. The label of a medication container shall identify the name of the medication and the name of the child for whom the medication is intended. Medication shall be administered to ONLY THE CHILD WHOSE NAME APPEARS ON THE CONTAINER.
4. A parent shall provide written consent for administration.
5. Written information shall include:
 - a. The name of the medication
 - b. The name of the child receiving the medication
 - c. A requirement for refrigeration
 - d. The amount of medication administered
 - e. The date of administration
 - f. The time of administration
 - g. The initials of the staff person who administered the medication
 - h. Special notes related to problems of administration

MEDICATION PROCEDURE FOR RAINBOW EXPRESS PRESCHOOL

1. Medication **MUST** be in its ORIGINAL container with the child's name typed on pharmacy label. (Ask the pharmacist to give you 1 empty bottle with typed label so you can pour medicine in it to remain at school.) **We will not give medication to a child with a different child's name on it, even if it's a sibling name. We will not give outdated medication to any child.**
2. REP will give medication **ONLY** at the lunch time hour. Ask your doctor to prescribe medication that can be given in that time frame.
3. The medication form must be filled out completely! Without the form, (shown below), we will not give medication. The form can be found in the kitchen or in the infant room. You may request extra forms to keep at home to fill out.
4. Place the completed form on the kitchen counter along with the medication. If medicine is to be refrigerated, place the medication on the medicine shelf in the refrigerator. Medication for infants must be given directly to a teacher. Medication may not be left on the shelves, in your child's bag, or in your child's possession.

ADMINISTRATION OF MEDICATION FORM

Please give my child _____, _____
child's name amount of medication

of _____ at the lunch hour, between 12:00 and 1:00 PM.
name of medicine

Does medication need refrigeration? Yes _____ No _____

Dates medicine is to be given

Parent's signature

DATE GIVEN BY
 INITIALS

TIME
GIVEN

DATE GIVEN BY
 INITIALS TIME
 GIVEN

