Request for Medication Administration ODHS 1217

Rule 5101:2-12-51 and Rule 5101:2-13-50 of the Ohio Administrative Code specify the requirements for administering medication, vitamins, food supplements, or modified diets to children in child care centers and type A family child care homes. This form must be completed as outline below:

Section I: Physician's instructions: (Name of Child)_____needs

the following medication_____Dosage_____Time(s) to be given at_____.

Form of medication: ☐ Tablet/capsule ☐ Liquid ☐ Inhaler ☐ Injection ☐ Nebulizer ☐ Other_____

Possible side effect to watch for:_____ ☐ None Anticipated

Expiration date *(not to exceed 6 months from date of this request)*:_____ ☐ For Episodic/Emergency

Only

_____ _____ _____

Signature of Physician | Telephone Number | Date

Note: If medication or vitamin is a prescription from pharmacy, physician's instructions and signature will not be required. Instead the parent/Guardian completes the following sections:

Rx Number:_____ Pharmacy:_____

Address:_____ Telephone Number:_____

**Section I does not need to be completed for certain nonprescription items; fever-reducing medicines that do not contain aspirin; cough or cold medications that do not contain codeine, and topical ointments, creams or lotions.

Section II: Parent/Guardian Request for Administration of Medicine, Vitamin, Food Supplement or Modified Diet. I hereby request and give permission to the administrator or his delegate to administer the following medication, vitamin, or special diet to

(Name of Child):_____ Name of item to be given_____

Dosage:_____ Times to be given:_____

Form of medication: ☐ Tablet/capsule ☐ Liquid ☐ Inhaler ☐ Injection ☐ Nebulizer ☐ Other_____

_____ _____

Signature of Parent/Guardian | Date of Signature

Section III: Medication Given: (Name of Child):_____

Date	Time Given	Name of Medicine, Vitamin , Special diet	Amount Given	Signature of Staff

(Use Reverse side to record additional dosages, if needed)

Prepared by the Ohio Department of Human Services in cooperation with the Ohio Department of Health.