Most Blessed Sacrament Parish School
4255 Bellevue Road
Toledo, Ohio 43613
(419)472-1121

School Year 2026-2027

Parent Permission to Administer Over-the-Counter Medication in Grades K-8 in order for over-the-counter (OTC) medication to be given to your child during school, this form needs to be completed by the student's parent/guardian. Return the completed form to your school's nurse.

Students with chronic health conditions and/or regular medications other than asthma are required to have written authorization from the student's physician. Student must have a current emergency medical authorization card on file to administer OTC medications.

Student Information:

Student's Name _____

Any known allergies to medications or their ingredients? If yes, please list

_____

Parent/Guardian Information:

Parent/Guardian Name _____ Parent/Guardian Name_____

Phone#(Cell) _____ Phone #(Cell) _____

Physician's Name: _____ Physician's Phone #: _____

Parent/Guardian Consent

The nurse and trained designee have permission to give my child the following over-the-counter medications for minor pain/conditions not related to head injury.

___ Acetaminophen (Tylenol) per container recommendations ____ Aloe Vera lotion

___ Ibuprofen (Motrin) per container recommendations ____ Cough Drops

___Triple antibiotic cream ____Throat Lozenges

___Benadryl anti-itch cream ____Antacid (TUMS/children's pepto)

*Please note, only Registered Nurses and trained designee may administer OTC medications in school. If your child needs OTC medications regularly, please contact the school nurse for a medication plan. Blessed Sacrament will provide the OTC medication. Should your child have a sensitivity or allergy to ingredients in common OTC medications, parents will provide unexpired acetaminophen and/or ibuprofen in a small original container.

_____ _____ _____

Parent Name (please print) Parent Signature Date

_____ _____ _____

School Nurse (please print) School Nurse signature Date