



BISHOP CONNOLLY HIGH SCHOOL

SCHOOL OVER-THE-COUNTER MEDICATION ORDER FORM 2022-2023

The school nurse may administer to any Bishop Connolly High School student or staff member on school property:

- Acetaminophen 325-650 mg by mouth every 4 hours as needed for mild pain and/or fever 100+ degrees (with parental consent)
- Ibuprofen 200-400mg by mouth every 6 hours as needed for mild pain, inflammation and/or fever 100+ degrees (with parental consent)
- Tums 1-2 chewable tablets by mouth once per day as needed for mild epigastric Discomfort (with parental consent)
- Caladryl Lotion or antibiotic ointment as needed for minor injuries (with parental consent)
- Medicated cough drops — Give 3 per day by mouth as needed for sore or irritated throat or mild cough (with parental consent)
- Diphenhydramine 25-50mg by mouth once as needed for mild allergic reaction (with parental consent)
- Epinephrine Auto Injector 0.3mg IM for ages 6 – adult (greater than 70 pounds) as needed for anaphylactic emergency (with parental consent)
- Hand Sanitizer as needed (with parental consent)
- Sunscreen application as needed for the outdoors (with parental consent)
- Mosquito/Insect Repellent as needed for the outdoors (with parental consent)

Please List any diagnosed allergies that your child has, and the reaction to the allergen:

Parent/Guardian Signature _____ Date _____