

FAMILY DAY CARE

Medication Authority Form



This form is required for authorising the administration of medication to a child in our care, as per the Education and Care Services National Regulations, Regulation 93. Please ensure all sections are fully completed to comply with these regulations. Educators are prohibited from administering any medication unless this form is fully completed and signed. The authorisation must be recorded in the child's medication record as required by Regulation 93 (5)(a).

I _____ (parent/guardian) authorise _____ (Educator)	
to administer the following medication to _____ (Child)	
I understand the potential risks and side effects of this medication.	
Parent/Guardian Full Name:	
Signature:	Date:
Child's Name:	Date of Birth:
Name of Medication:	
Dosage:	Method of administration:
Time and date the last dosage was given:	
Storage Requirements:	
Time to be given:	Date to be given:
Special Instructions: (eg 'with food'):	
Reason for medication:	
Side effects to monitor for:	
Details of any other medication that the child has been given in the last 24 hours:	
Doctor's Name:	Phone:

Medication Administration Guidelines

1. Original Packaging: Medication must be in its original packaging to be administered.
2. Must be in a container with a pharmacy label showing the child's name and a current use-by date.
3. Non-Prescription, Homeopathic, Herbal, or Naturopathic Medication must be in a container labeled with the child's name, the medication name and a use-by date.
4. Must be accompanied by instructions or a letter from a doctor
5. Risk management and communication plan must be in place for long term medications

RECORD OF ADMINISTRATION OF MEDICATION

Educators are required to complete this section every time they administer the approved medication.						
Date	Time	Name of Medication	Method of Administration	Dosage	Educator Name	Educator Signature
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						