



Medication Administration Record

Child's Name: _____ Date of Birth: _____
 Parent/Legal Guardian Name: _____ Telephone: _____
 Center Name: _____

Head Start/Early Head Start personnel may administer medication to a Head Start/Early Head Start child and store medication upon request by the child's parent/guardian and physician in the absence of the or legal guardian in the home. The prescribed medication must be provided by the parent or guardian in the original container with written instructions by the physician for administration. All expired medication will be discarded by staff. Medication that is not used will be given back to the parent.

PLEASE COMPLETE THE FOLLOWING:

Is it necessary for medication to be administered during the hours of Head Start/Early Head Start program operation?
 YES, time when medication is to be administered. _____
 NO

Medication Schedule:

Name of Medication	Dosage	Time Given	Date on Medication Label	Medication Expiration Date	Method of Administration	Side Effects Observed (If Any)	Staff Person Administering Medication

Staff Signature: _____ Date: _____
 Parent Signature: _____ Date: _____

****The Health Coordinator/Facility Administrator must ensure that documentation is noted in the child's case notes each time medication is administered and that there is a prescription by the health care provider on file.*