

Orleans Yacht Club, Inc. – Junior Sailing Program Medication Administration & Storage Form

This form is to be completed by a licensed medical provider and parent/guardian before any medication (including over-the counter or prescription including allergy medications, inhalers or EpiPens) can be dispensed. The medicine must be in its original packaging and/or in a clearly labeled container provided by a pharmacist.

Student Name _____ D.O.B. _____

Physician Medication Order: Please complete if the above named student must take the designated medication during the three hour sailing lesson period conducted by the Junior Sailing Program.

Medication _____ Dosage _____ Route _____

Frequency _____ Time(s) to be given _____

Special Instructions _____

Consent for self- administration of ___insulin ___ inhaler if determined to be safe and appropriate: Yes___ No___

Date of Order _____ Discontinuation Date _____

Diagnosis _____ Drug/Food Allergies _____

Name of licensed provider _____ Title _____

Signature of licensed provider _____ Date _____ Telephone No. _____

Parent/Guardian Consent to Store/Administer Medications:

Name of Parent/ Guardian _____ Relationship to student _____

Please list any additional medications currently taken by student _____

Consent for self-administration of ___ inhaler ___EpiPen if safe and appropriate: Yes___ No___

I, the undersigned parent or guardian, give permission to the Junior Sailing Program Health Care Supervisor (as designated by the JSP's designated Health Care Consultant) to store on the premises and/or to administer the above medication to my child or to supervise my child in taking the above medication if approved to do so. I authorize the Junior Sailing Program's Health Care Supervisor to share information about such medication administration, as necessary, for the health and safety of my child with appropriate medical personnel. I understand that I must retrieve the medication from the Junior Sailing Program within twenty four hours of the end of my child's program enrollment or the medication will be destroyed.

Signature of Parent/Guardian _____ Date _____

Telephone (home) _____ (cell) _____

Storage of medication:

Medication Name: _____

Number of doses at drop off: _____ Number of doses at pick-up: _____

Pharmacy Name & Date of Prescription: _____

****Please read the medication policies on the back of this form for exceptions to this policy.***

Orleans Yacht Club, Inc. Junior Sailing Program Medication Policies:

State regulations cover the storage and dispensing of medications.

1. The Junior Sailing Program's Health Care Consultant (Dr. David Penfield) has designated a Health Care Supervisor (who is the Program Director and/or Head Instructor) who may administer authorized medications: Tylenol 325mg (2 tab) or Benedryl 25mg (1 tab) IF the child weighs over 80 pounds. EPI-PEN for severe allergic reactions.
2. Medication must be supplied to the Health Care Supervisor(Program Director or Head Instructor) in the original pharmacy container. The container must have a pharmacy label showing the prescription number, patient's name, date filled, physician's name, name of medication and directions for use. No more than a 3-day supply may be kept at the OYC.
3. Medication is stored in a locked container in the Junior Sailing Program's office. Exceptions to storage are authorized for medications for treatment of allergies and asthma which have instructions that they are carried on the child's person.
4. A written "Order" from the student's licensed health care provider and an OYC JSP Medication Storage-Administration Authorization "Consent" form signed by the student's parent/guardian must be submitted to the OYC prior to the start of enrollment. This applies to all daily medications and any medications taken on an as needed or self-administered basis such as allergy medications, inhalers and EpiPens.
5. If a parent/guardian has signed an OYC JSP Medication Storage-Administration Authorization, the Health Care Supervisor (Program Director or Head Instructor) may administer approved medications to an individual student once during the day.
6. If short-term (10 day or less) prescription medication is to be administered during the day, the original pharmacy container will serve as the written "Order" from the health care provider. An OYC JSP Medication Storage-Administration Authorization form signed by parent/guardian is still required.
7. Herbal and/or homeopathic medication will not be administered during the sailing lessons.
8. For their own safety, students should never transport medication to and from sailing lessons or keep medicine in their possession during sailing lessons. The exception to this policy is for their personal inhaler and/or EpiPen.
9. If a student refuses to take prescribed medications as outlined on this documents, this refusal is documented in the JSP's Medical log and the parent/guardian will be notified immediately.