

## Medication Form Requirements

Type of Medication	Examples of Medication	Required Forms
<p><b>Routine</b> Taken regularly at a specific time/s of day over a period of time (either short-term or long-term).</p>	<p>Antibiotics Ritalin Enzyme tablets Insulin Asthma reliever</p>	<p><b>Form A</b> - completed by parent/Legal Guardian <i>Form B</i> - may be required if instructions for administration are ambiguous</p>
<p><b>As needed</b> Administered only in response to certain symptoms (e.g., rash, irritated eyes, migraines).</p>	<p>Paracetamol Topical creams/ointments Asthma reliever</p>	<p><b>Form A</b> - completed by parent/Legal Guardian <b>Form B</b> - completed by Dr</p>
<p><b>Emergency Medical Conditions</b> Administered as part of an Action Plan response. (e.g., asthma, anaphylaxis, epilepsy, diabetes, etc.)</p>	<p>Antihistamines EpiPen Asthma reliever Midazolam</p>	<p><b>Form A</b> - completed by parent/Legal Guardian <b>Action/Management Plan</b> - completed by Dr: • Anaphylaxis/Asthma action plan, Diabetes action/management plan, Epilepsy action/management plan or Other medical action/management plan. <b>Form B</b> - must be provided if an action/management plan is not provided. <b>Individual Health Support Plan</b>- completed by parent/Legal Guardian</p>