



DEAR PARENTS,

OCCASIONALLY, A CHILD WILL DEVELOP A HIGH FEVER AT THE SPUR OF THE MOMENT. UPON CALLING PARENTS, TO INFORM THEM OF THIS, THEY OFTEN REQUEST THAT WE ADMINISTER TYLENOL TO BRING THE TEMPERATURE DOWN. LEGALLY, WE ARE UNABLE TO DO THIS UNLESS THE ATTACHED FORM IS SIGNED AND PLACED ON FILE IN THE OFFICE.

THE FOLLOWING PROCEDURE WILL BE FOLLOWED, ASSUMING THAT WE HAVE THE FORM COMPLETED AND SIGNED BY THE PARENT OR GUARDIAN:

1. THE CHILD'S TEMPERATURE WILL BE TAKEN.
2. PARENT WILL BE CALLED.
3. PARENT REQUESTS THAT TYLENOL BE GIVEN AND QUOTES THE DOSAGE.
4. TEACHER WILL WRITE THIS DOSAGE ON THE MEDICATION CHART AND ADMINISTER THE MEDICATION.
5. PARENT/GUARDIAN MUST SIGN MEDICATION CHART WHEN HE/SHE PICKS UP THE CHILD.

PLEASE KEEP IN MIND THAT YOU STILL MAY BE REQUIRED TO PICK UP YOUR CHILD. IT IS BECAUSE WE ARE AWARE OF THE AFFECTS THAT A HIGH TEMPERATURE CAN HAVE ON A PRE-SCHOOL THAT WE HAVE DECIDED TO FOLLOW THIS PROCEDURE. IF YOU HAVE ANY QUESTIONS OR CONCERNS, PLEASE FEEL FREE TO STOP BY THE OFFICE OR CALL.

THIS POLICY WILL ONLY COVER THE ADMINISTRATION OF CHILDREN'S TYLENOL, EFFECTIVE UPON CONTACT WITH THE PARENTS, AND WILL NOT BE CONSIDERED UNLESS THE ATTACHED FORM IS SIGNED AND IN THE CHILD'S FILE.

THANK YOU,

I GIVE MY CONSENT, FOR MY CHILD, _____ TO RECEIVE CHILDREN'S TYLENOL, BY HIS/HER TEACHER OF THE CHILDREN'S SCHOOL. THIS WILL BE DONE ONLY AFTER I HAVE BEEN CONTACTED BY THE CENTER AND I HAVE GIVEN VERBAL PERMISSION OVER THE TELEPHONE.

SIGNATURE OF PARENT/GUARDIAN

DATE

