** South Farnham School Record of medicine administered to an individual child**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of school/setting |  | | | |
| Name of child |  | | | |
| Date medicine provided by parent |  |  |  |  |
| Group/class/form |  | | | |
| Quantity received |  | | | |
| Name and strength of medicine |  | | | |
| Expiry date |  |  |  |  |
| Quantity returned |  | | | |
| Dose and frequency of medicine |  | | | |

Staff signature

Signature of parent

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date |  |  |  |  |  |  |  |  |  |
| Time given |  | | |  | | |  | | |
| Dose given |  | | |  | | |  | | |
| Name of member of staff |  | | |  | | |  | | |
| Staff initials |  | | |  | | |  | | |
|  |  | | |  | | |  | | |
| Date |  |  |  |  |  |  |  |  |  |
| Time given |  | | |  | | |  | | |
| Dose given |  | | |  | | |  | | |
| Name of member of staff |  | | |  | | |  | | |
| Staff initials |  | | |  | | |  | | |

**C: Record of medicine administered to an individual child (Continued)**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date |  |  |  |  |  |  |  |  |  |
| Time given |  | | |  | | |  | | |
| Dose given |  | | |  | | |  | | |
| Name of member of staff |  | | |  | | |  | | |
| Staff initials |  | | |  | | |  | | |
|  |  | | |  | | |  | | |
| Date |  |  |  |  |  |  |  |  |  |
| Time given |  | | |  | | |  | | |
| Dose given |  | | |  | | |  | | |
| Name of member of staff |  | | |  | | |  | | |
| Staff initials |  | | |  | | |  | | |
|  |  | | |  | | |  | | |
| Date |  |  |  |  |  |  |  |  |  |
| Time given |  | | |  | | |  | | |
| Dose given |  | | |  | | |  | | |
| Name of member of staff |  | | |  | | |  | | |
| Staff initials |  | | |  | | |  | | |
|  |  | | |  | | |  | | |
| Date |  |  |  |  |  |  |  |  |  |
| Time given |  | | |  | | |  | | |
| Dose given |  | | |  | | |  | | |
| Name of member of staff |  | | |  | | |  | | |
| Staff initials |  | | |  | | |  | | |