Trinity Catholic High School
Permission for Ibuprofen or Acetaminophen

Trinity Catholic High School's administrative policies, school physician collaboration and school nurse standards of practice allow us to administer to you child either acetaminophen (Tylenol) or ibuprofen (Advil, Motrin), in an over-the-counter, manufacturer's recommended dosage. Acetaminophen and ibuprofen are supplied by TCHS and kept in the Health Office.

These could be administered for: fever over 100.0 F, headache, dental discomfort or menstrual cramps.

In order to comply with both Massachusetts Law and the Board of Registration in Nursing regulations, your written parental permission is REQUIRED. Please complete and return this form. No medication can be given without prior written parental authorization.

I, _____/_____ give permission for the
please print relationship

School Nurse or authorized delegate to administer: (check appropriate box)

acetaminophen (By mouth, 5– 10 mg/kg/dose = **1 – 2 tablets/dose**, every 4- 6 hours)

ibuprofen (By mouth, 5-10 mg/kg/dose = **1 – 2 tablets/dose**, every 6-8 hours)

to my son/daughter_____
child's full name, please print

Allergies?_____
denote specific allergy or indicate none

This permission is valid for the 2009 – 2010 school year and can be withdrawn at any time.

I hereby release Trinity Catholic High School and its Trustees, officers and employees from any liability of injury which may arise from the authorized administration of the noted medication.

Signature of Parent/Guardian Date

Daytime Phone Numbers_____