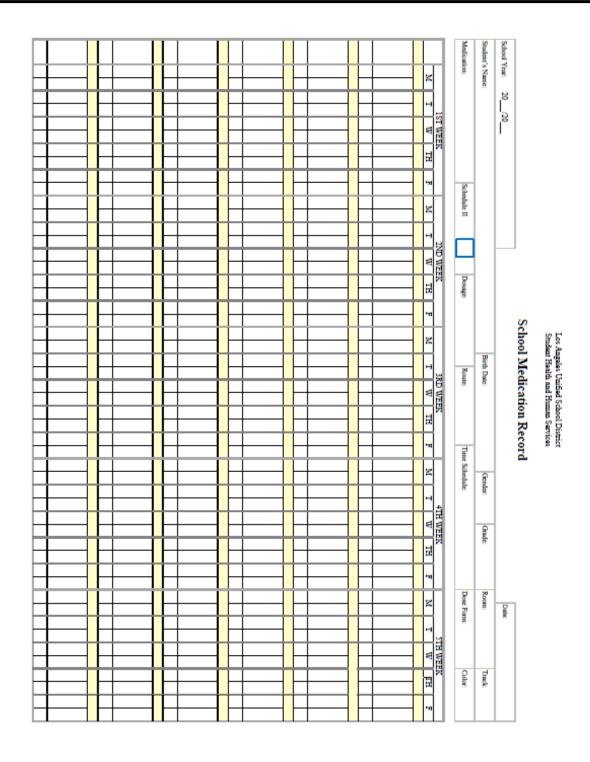


LOS ANGELES UNIFIED SCHOOL DISTRICT POLICY BULLETIN





Circle count when refill of Schedule II drugs is rec'd in the lower box; also chart # of additional doses rec'd in the comment section.

For Schedule II drugs, Indicate count after each dose administration in the lower box; le: Ritalin & Dexedrine.

Indicate time administered & initial in the appropriate box.

LOS ANGELES UNIFIED SCHOOL DISTRICT POLICY BULLETIN

Print Name Print Name

Signature

Initial:

Print Name

Signature

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DATE

REMARKS

			Student Health and Hum	an Services				
			School Medicatio	n Record				
							Duda:	
			Birth Date:	0	ender:	Grade:	loom:	Track
i		Dosage:	Route	Time Sche	dule		Ose Form:	Color:
ole):			Name of Teacher Notified:			Date noti	fied:	
			Parent's Phones Home	1	Work		M	
	Address:			Cay		Zip Code:	Phone	
	Date	14	Reviewed by School	Nurse:			Dute:	
A)HI	ORIZE	D SIGNATURES	Print, Sign	& Initia	D		
	Schedule II Date Discontinued (If applicable): ed by:						School Medication Record School Medication Record Gender: Gender: Gender:	School Medication Record School Medication Record

BUL-3878.3 Office of the Medical Director

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SIGNATURE