spilled milk social club
Medication Authorization

Directions: Use this form when staff administer medications, as applicable in Texas Administrative Code 744.2655, 746.3805 and 747.3605

Parent Section:					
Child's Full Name	Name of Medication (*if prescribed by a doctor, we must have the prescription label)	Dosage	<b>Specific Date or Date Range for</b> <b>administration</b> (*you may also write "as needed")	Time to be administered	Parent Signature
Staff fill out the folowing section when administering medication:					
Date	Name of Medication	Dosage Given	Notes (if given on an "as needed" basis)	Time administered	Employee's name