



# Authorization for Non-Prescription Medications

Form provided by Health Consultant Team at Child Care Aware® of North Dakota

Written parental permission is required by licensing for administration of over-the-counter (OTC) medications. To reduce the likelihood of a parent lawsuit, it is recommended that child care providers also obtain written instructions and permission from a health care provider.

OTC medications should be kept in the original manufacturer’s container. The medication should be labeled with the child’s name by the parent, and given according to the manufacturer’s instructions. Make sure the medication is not expired.

- Cold and cough medication is not recommended for children under 6 years old.

Use one form for each medication. Please fill out completely and print clearly.

Name of child: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Medication: \_\_\_\_\_ Dosage: \_\_\_\_\_

Time(s) of day medication is to be given: \_\_\_\_\_

Special instruction (ie: refrigerate): \_\_\_\_\_

Reason for medication: \_\_\_\_\_

Time of last dose (if applicable): \_\_\_\_\_

Program/Provider’s name: \_\_\_\_\_

Parent(s) or guardian(s) name (printed): \_\_\_\_\_

Signature of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Healthcare provider’s name: (printed): \_\_\_\_\_

Signature of health care provider: \_\_\_\_\_ Date: \_\_\_\_\_

Date	Time Given	Dose	Signature

Keep this form in the child’s file when medication is finished.