



Medication Authorisation Form

Child Details

Name of Extend OSHC Service:

First name: Last name:

All medication needs to be:

- ✓ In the original container.
- ✓ Clearly marked with child's name.
- ✓ The dosage as per prescribed medication.

Over the counter medication must be accompanied by authorisation from a Medical Practitioner with the above mentioned criteria outlined including a date range that the medication is relevant for.

Parent / Guardian to complete this section

Date:

Is the medication in the child's name? Yes / No

Type of medication: Dosage required:

Last Dosage

Time to be administered:

To be administered: Everyday this week / Everyday this term / Other:

Signature of Parent / Guardian:	<input type="text"/>
Date:	<input type="text"/>



Staff to complete this section:

- ✓ Date: _____
- ✓ Is the medication in the child's name?
- ✓ Is the medication the same as stated by Parent / Guardian?
- ✓ Expiry date: _____
- ✓ Is the expiry date still valid?
- ✓ Time administered: _____
- ✓ Staff signature: _____
- ✓ Second staff signature (witness): _____
- ✓ Date: _____
- ✓ Time: _____
- ✓ Parent / Guardian Initial: _____

If the medication is administered to the child:

- i) the dosage that was administered; and
- ii) the time and date the medication was administered; and
- iii) the name and signature of the person who administered the medication; and
- iv) the name and signature of the person who checked the dosage administered, if regulation 83 requires the dosage to be checked by a person other than the person who administered the medication.

Accident, injury, trauma and illness record must include:

- a) Details of any accident in relation to a child or injury received by a child or trauma to which a child has been subjected while being cared for or educated by the other children's service or the family day carer, including:
 - i) the name of the child; and
 - ii) the circumstances leading to the accident, injury or trauma; and
 - iii) the nature of the accident, injury or trauma; and
 - iv) any products or structures involved; and
 - v) the time and date the accident occurred, the injury was received or the child was subjected to the trauma
- b) Details of any illness which becomes apparent while the child is being cared for or educated by the children's service or the family day carer including:
 - i) the name of the child; and
 - ii) any relevant circumstances surrounding the child becoming ill and any apparent symptoms; and
 - iii) the time and date of the apparent onset of the illness
- c) Details of the action taken by the children's service or family day carer in relation to any accident, injury, trauma or illness which a child has suffered while being cared for or educated by the children's services or family day carer.
- d) The name of the person who was notified of any accident, injury, trauma or illness which a child has suffered while being cared for or educated by the children's services or family day carer and the time and date of the notification.
- e) The name and signature of the person making an entry in the record.