MISSOULA COUNTY PUBLIC SCHOOLS

Brooke Krininger, MPH, BSN, RN, Health Services Coordinator

Russ Lodge, Superintendent

Dear Parents/Guardians:

Missoula County Public Schools policy requires your consent in order to administer the over-the-counter medications described below. All other medications require the signature of your child's health care provider. (This includes all prescription, over the counter and CAM (Complementary and Alternative Medicine).

STANDING ORDERS FOR STUDENTS

	Acetaminophen (Tylenol) Dose		Ibuprofen (Advil/Motrin) Dose	
Kindergarten	1 ½ teaspoon= 7.5 ml=240mg of liquid		1 ½ teaspoon= 7.5 ml= 150mg of liquid	
	acetaminophen 160mg/5 ml	i	ibuprofen 100mg/5 ml concentration	
	concentration			
Grades 1-4	One 325 mg tablet OR one 500mg tablet		One 200 mg tablet or 2 teaspoons/10	
	(up to 3 teaspoons/15 ml)	ı	ml	
Grades 5-8	Two 325 mg tablets OR ONE 500mg		Two 200mg tablets or 4 teaspoons/20	
	tablet (3-4 teaspoons/15-20 ml)		ml	
Frequency/	Up to every 4 hours, no more than 1300		Once every 8 hours.	
max dose	mg in any 8 hour period			

- Tums (calcium carbonate) 1-2 tablets chewed, no more than twice per day for minor stomach distress.
- Benadryl (diphenhydramine) 25mg for minor allergic reaction to include swelling at site of sting, and/or hives or itching
 at area of contact of allergen. The school will notify the parent and school nurse of allergic reaction prior to medication
 administration when possible.

On File in Health Services	
Physician Signaure - Dr. Vannatta	

Student Name:	
Student Name:	

Date	Time	Medication	Amount Taken	Reason/ Complaint	Administered By: Signature