

Consent for Administration of Over the Counter Medications

There are many "unanticipated" needs for over-the-counter medications, such as headaches, muscle aches, colds, minor sore throats, and ailments during camp and other band events. We do have medications available for these needs. For the safety and health of your children, we are asking for written consent before administering any medications. There will be a record kept of what medications are given so that appropriate doses are given. You will always be called in the event of any serious illness or injury, fever, or at any time your child or any of the camp staff feels that you should be called. Please mark an "X" by any of the following medications that you give permission for your child to receive if needed.

- Ibuprofen (Motrin, Advil) for headaches, sore muscles, sore throat;
- Sudafed for colds or congestion;
- Benadryl for allergies, itching;
- Tylenol for headache, sore muscles sore throat;
- Pectin throat lozenges for sore throat (usually from yelling!);
- Pepto-Bismol for nausea, diarrhea, upset stomach;
- Dextromoethorphan (Robitussin DM) for cough.

I give consent for my child _____ to receive the above checked over the counter medications as needed administered by school personnel.

Parent and/or legal guardian

Date