

Washoe County Human Services Agency

Over-The-Counter (OTC) / Prescription (non-psychotropic) Medication Consent

Child's Name: _____ DOB: _____ Age: _____ Caseworker: _____

Placement Name: _____ Placement Date: _____ Phone: _____

Child's Known Allergies: _____

Child's Known Medical Conditions/Diagnosis: _____

Child's Primary Care Physician (PCP): _____ Phone: _____

This authorization provides consent from the caseworker/parent for the following OTC / prescription / standing medications (non-psychotropic) to be administered to the above-mentioned child as indicated below. These medications will be administered only in accordance with regulations listed in NAC 424 and instructions listed on pages 1 and 2 of this consent. Generic substitutes may be utilized for all medications listed below. This consent is required at time of placement and medications (OTC and 'non-psychotropic' prescribed) may be added below at a later date. Consent and medication logs are required for ALL medications, EXCEPT topical remedies (sunscreen, bug repellent, face washes, non-prescription creams, etc.). Please seek guidance from your pharmacist regarding drug interactions.

Parent/Guardian Initial	Medication	Indications (Must be given as directed by package or prescription)	Date Approved
	Tylenol	For pain or fever	
	Advil, Motrin	For pain or fever, or inflammation	
	Midol	For menstrual cramping	
	Actifed/Sudafed	For nasal/sinus congestion	
	Benadryl/Allegra/Claritin/etc. (childrens)	For allergy symptoms (NOT FOR SLEEP)	
	Tums/Roloids/Maalox/Mylanta	For gastric acid or heartburn	
	Imodium Anti-Diarrhea	For diarrhea and loose stools	
	Pepto-Bismol	For heartburn, nausea, gas, indigestion, diarrhea	
	Milk of Magnesia/Ex-lax	For constipation	
	Cough Drops / Throat Lozenge	For minor throat irritation and cough	
	Cold Medicine	For cold symptoms	
	Throat Spray (alcohol free only)	For minor throat irritation	
	Cough Syrup	For minor cough	
	Dramamine	For prevention and treatment of nausea/dizziness	
	Vitamin C / Multi-vitamins	Dietary supplement	
	Simethicone/Gripe Water/Mylicon	Gas relief	
	Orajel / Benzocaine	Teething / dental pain	
	Other OTC:		
	Other OTC:		
	Other OTC:		
	Other OTC:		
	Other 'medical' RX:		
	Other 'medical' RX:		
	Other 'medical' RX:		

EMERGENCIES: If an emergency arises, the care provider can begin administering a prescribed medication immediately without written consent by the parent/guardian as long as the medical provider believes that waiting until written consent is obtained may be harmful to the child. The care provider should then follow up with the parent/guardian as soon as possible to obtain written consent. An example of this is a child with an ear infection, conjunctivitis, strep-throat, etc. needing to begin treatment on a weekend or after hours.

NEVADA ADMINISTRATIVE CODE (NAC): NAC 424 defines all regulations for foster homes. It is the caregiver's responsibility to ensure understanding of all regulations associated with medications and children in the custody of a child welfare agency.

MEDICATION LOGS: All placement parents are required to complete medications logs for all medications provided to children in their care. There are two (2) specific medications logs associated with this requirement for use in Washoe County (the 'OTC (Over-The-Counter) Medication Administration Log' (HSACS 597) and the 'Prescription Medication Administration Log' (HSACS 590) and are specific to OTC medications or Prescribed (Medical use and/or Psychotropic use). For both medication logs, the care provider must initial each medication administration. By initialing each date/time of administration, you are verifying the following:

1. Written permission has been obtained (from the parent / guardian) to administer the medication.
2. You have administered the medication to the child yourself and have witnessed the child take it (and that the child has not 'saved' it in his/her hand or mouth, etc.).
3. You will report any medication error, and/or adverse reaction by the child, to the guardian within 24 hours (verbally) and within 2 working days (in writing). You also understand the possible side effects of the medication. Med Errors (missed doses) must be marked with a 'O' and the reason listed on the bottom of the med log in the 'Notes' section.
4. You are either:
 - a. Following the package instructions regarding age, condition/symptom for all non-prescribed medications (OTC);
 - b. Following a medical professional's written 'override' to the packaging instructions for non-prescribed medications (OTC);
 - c. Administering a prescribed medical use medication in accordance with the prescription.
 - d. Administering a prescribed psychotropic medication in accordance with the prescription AND the PLR consent.

PSYCHOTROPIC MEDICATIONS: Psychotropic Medications are defined by Washoe County Human Services Agency as: Medications, the prescribed intent of which is to affect or alter thought processes, mood, or behavior. This includes, but is not limited to Antipsychotics, Antidepressant, Anxiolytic (Anti-Anxiety) medications, medications to treat ADHD, and other non-psychotropic medications prescribed as part of the child's psychiatric treatment regime (ie. Sleep aids, OTC supplements, and blood pressure medications). The classification of a medication depends on its stated and intended effects when prescribed, because it may have different uses and effects (i.e. fish oil for depression, Benadryl for sleep, St. Johns Wart for depression, etc.). In addition, psychotropic medication must never be used for the convenience of staff members or caregivers, to punish children, or as a substitute for adequate staffing, programming, or treatment. Any psychotropic medications as detailed above and below may only be consented to by the child's PLR (Person Legally Responsible for the Psychiatric Care of a Child). ***Only a PLR can approve or deny psychiatric services, schedule psychiatric appointments for the child, and approve or deny psychotropic medications (using the specific PLR consent form: HSACS 546) and must be provided by the PLR and kept with the child's medications prior to administering the psychotropic medications.***

SLEEP MEDICATIONS: Children who have a PLR assigned to them can only be administered sleep medications (including Melatonin) as consented to by the Psychiatrist AND the PLR and will be included on the PLR consent forms. If the child does not have a PLR or Psychiatrist assigned to him/her, consent for an OTC sleep aid must be discussed with and approved (in writing on the reverse side) by the parent/guardian and should only be administered for a short period of time, and in accordance with the packaging instructions. If sleep issues persist, the child should be seen by a medical provider/Psychiatrist (and first assigned to a PLR).

DESTRUCTION OF MEDICATIONS: Prescribed medications, once no longer needed for a child, must be destroyed (and NEVER provided to the child's next placement). All medications may be discarded in a drop box at any Law Enforcement Agency or may be destroyed at home: for pills, tabs, etc. place in a sealed non see-through bag with used/moist coffee grounds or wet kitty litter and discard in the trash. All liquid medications should be placed in a sealed non see-through bag with either used coffee grounds or kitty litter and discarded in the trash. All destruction of medications must be documented on HSACS form 803 (Medication Handling Form) and provided to the caseworker.

STORAGE: All prescription and non-prescription medication must be stored in a LOCKED place that is inaccessible to children. A medication, such as an Inhaler or Epi-pen, that must be kept with the child at all times (pursuant to the instructions of a physician) is exempt from this requirement.

I have read and understand the definitions and descriptions on this page: _____

Careprovider name

Signature

Date