



HILLSIDE STUDENT COMMUNITY SCHOOL

Hillside Medical Tylenol and Ibuprofen Policy & Refusal Form / EpiPen Waiver Form

At all times, you as parent/guardian are responsible and must write a permission slip for any medication taken by your child at school.

Tylenol and Ibuprofen Policy

Hillside Student Community students may be administered Tylenol or Ibuprofen for minor pain complaints unless the form below is signed by a parent or guardian.

Tylenol and Ibuprofen Refusal Form

If you DO NOT wish your child to be administered Tylenol or Ibuprofen, please fill out the section below and return to Hillside prior to the start of the school year. Thank you.

Student Name: _____

I DO NOT want my child to be given Tylenol or Ibuprofen during the 2011-2012 school year.

Parent's Or Guardian's Signature _____ Date _____

EpiPen Waiver

If your child has allergies that require the use of an EpiPen, please fill out the section below and return to Hillside prior to the start of the school year. Thank you.

In case my child suffers an allergic reaction during HSC school hours, a HSC staff member will administer an antidotal shot via an EpiPen. I will take all responsibility for this action, and will keep up the supply of EpiPens as needed.

Parent's Or Guardian's Signature _____ Date _____