

# Record of medicine administered to an individual child



<b>Name of school/setting</b>	St Peter-in-Thamet CEJ School
<b>Name of child</b>	
<b>Date medicine provided by parent</b>	
<b>Group/class/form</b>	
<b>Quantity received</b>	
<b>Name and strength of medicine</b>	
<b>Expiry date</b>	
<b>Quantity returned</b>	
<b>Dose and frequency of medicine</b>	
<b>Medical condition</b>	

Parent/Carer Signature \_\_\_\_\_

Staff Signature \_\_\_\_\_

<b>Date</b>			
<b>Time given</b>			
<b>Dose given</b>			
<b>Name of member of staff</b>			
<b>Staff initials</b>			

<b>Date</b>			
<b>Time given</b>			
<b>Dose given</b>			
<b>Name of member of staff</b>			
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