

Medication/Procedure Log



Student Name: _____ DOB: _____ Grade: _____

Procedure or Medication Name: _____ Dosage: _____ Time: _____

Route of medication: By mouth Inhaled Injected Other _____

NOTE: School Nurse to be notified of new or changed orders

	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F
September																									
Initials																									
Time																									
Dosage																									
October																									
Initials																									
Time																									
Dosage																									
November																									
Initials																									
Time																									
Dosage																									
December																									
Initials																									
Time																									
Dosage																									
January																									
Initials																									
Time																									
Dosage																									
February																									
Initials																									
Time																									
Dosage																									
March																									
Initials																									
Time																									
Dosage																									
April																									
Initials																									
Time																									
Dosage																									
May																									
Initials																									
Time																									
Dosage																									
June																									
Initials																									
Time																									
Dosage																									

Initials and signatures of persons administering medication or procedure: _____

- CODES (Enter a code for every day)
- ◆ Initials=medication/procedure administered as ordered
 - ◆ A=absent
 - ◆ O=no medication supplied - document calls to parents to request more meds
 - ◆ ns=no school

- Codes below require MED INCIDENT report
- ◆ R=refused
 - ◆ N=student called, did not come
 - ◆ NC=student was not called
 - ◆ H=dose held for reason noted