MEDICAL POLICY

LAST REVIEW: September 2025
NEXT REVIEW: September 2026
REVIEWER: School Nurse

INTRODUCTION

Care of people and concern for their welfare are integral to the ethos of RGS. This school is committed to ensuring the health, safety and welfare of all employees, students and others who are legally present on our premises and in our workplace. In keeping with this commitment, priority is given to the provision of adequate first aid facilities and first aid treatment for all individuals at school in accordance with the legislative requirements of the Ministry of Public Health.

All staff should read and be aware of this Policy, know who to contact in the event of any illness, accident or injury and ensure this Policy is followed in relation to the administration of first aid. All staff will do their best to secure the welfare of the pupils.

Anyone on the School premises is expected to take reasonable care for their own and others' safety.

SCHOOL CLINIC

The school clinic is near the Atrium and Sports hall with clear signage. If a pupil becomes unwell in school or has an accident, they should visit the school nurse in the clinic. The clinic is open from 7:30 am – 2:30 pm. during term time. If the nurse must leave the room, a proper sign of her location is posted on the door. If the school nurse is absent, every effort will be made to find a supply registered nurse or a first aider to cover.

In visiting the clinic, Pupils in Early Years should be accompanied by a member of staff. Pupils in Key Stage1,2 and 3 should be accompanied by another pupil or a member of staff. After receiving treatment pupils in the Early Years must not be sent back unaccompanied. Pupils should not be allowed to stay in the medical room unless there is a medical problem. If they are sick, they can stay for one hour under the nurse's direct care in the clinic. After this time, they will either be sent back to class or sent home, depending on the assessment and clinical judgement of the nurse. A medical/injury (Appendix E) form will be given on each visit.

DIGNITY AND PRIVACY POLICY

At all times RGS aim to respect the dignity and privacy of all children with medical conditions by only sharing information with those who have a role in directly supporting the child's needs if consent was given by the parents.

ACCIDENT AND EMERGENCY

If an accident or sudden serious illness occurs at school, every effort will be made to contact parents, but the immediate treatment of the injured student is our first concern. The school's

Registered Nurse will administer first aid. If the situation is serious enough to require other treatment, 999 will be contacted immediately and an ambulance will transport the student to the hospital if parents/guardian have given permission to do so on the Student Medical Form. The school will request that students be taken to the closest hospital. School staff members will accompany the student. Parents will be notified of the hospital location and should immediately go to the hospital, where the staff members will be waiting to meet them.

BUMP AND HEAD INJURIES

Children frequently sustain bangs and minor head injuries while in school. Most head injuries are not serious and simply result in a bump or bruise. Those who suffer from head injury MUST be reviewed and evaluated by the school nurse and proper first aid must be given.

Minor Head injury

- Child should be assessed and treated by the school nurse.
- Depending on the severity of the injury, or if there is a visible cut wound that needs suturing, Parents should be called to collect if necessary.
- The accident/injury form and head injury instruction guide (Appendix F) must be given to the parent on the child's collection.
- If the child remains in the school, monitoring should take place – if their condition deteriorates necessary action must be taken.

Severe Head injury

- If after a head injury a child remains unconscious or fits, an ambulance should be called immediately (999). Parents will be called and informed right away as well.
- Someone should remain with the child until professional help arrives – do not leave the child unattended.
- School staff members will accompany the student to the hospital until the parents arrive.

MEDICATION POLICY

Pupils may need to take medication at some point during their school life. As far as possible, medication should be taken at home and only in school when necessary and would be detrimental to their health. However, some pupils may require regular medication on a long-term basis to treat medical conditions which, if not managed correctly, could limit their access to education. If medication is required to be administered, the following procedure should be followed:

- Only medication prescribed by a physician will be given in school.
- Written permission from the parents/guardian must be completed and received prior

to the administration of any medication (Appendix B).

- All medications to be taken at school must be delivered to the school nurse. If parents have sent in medication to be administered by the nurse, medicines MUST be in date, labelled, and provided in the original container (except in the case of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be administered.
- Early Years pupils should be brought to the nurse by a staff member for the medicine to be administered. Key Stage 1, 2 and 3 pupils are permitted to visit the clinic unaccompanied. If the child does not arrive at the clinic, the nurse will contact the teacher and/or teaching assistants.
- Medication will not be used beyond the expiry date

In case of school trips, If the school nurse accompanies students on a trip, she will be responsible for medication administration unless otherwise noted.

If the school nurse does not accompany students on a trip, the student's teacher or other designated school employee will be responsible for medication administration, including inhalers and emergency medications such as EpiPen.

Everyone designated to administer medications will receive special administration instruction/training from the school nurse.

Occasional and Regular Medication

A 'Consent to Administer Medication' Form must be completed for any medication to be given regularly, either on a long-term basis (e.g., asthma inhalers) or a short-term basis (e.g., antibiotics). Any medication given is recorded in their individual medication log sheet indicating the dose, time and strength given. (Appendix C)

When regular doses of medication are required in school, these will be given at break and lunchtime to avoid disruption to the school day.

Non-Prescription Medication

With the parent's permission on the Student Medical form, commonly taken over the counter medications will only be given to the child when necessary and after the parent has been contacted first. If the parent cannot be contacted, then no oral medication can be given.

SUN SAFETY

Everyone in the community has a responsibility to ensure that pupils' immediate and long-term health is not put at risk through excessive exposure to the sun.

- All pupils should wear a hat during play or when working outside. If they do not have a hat, they must play undercover or in shaded areas.

- Teachers should consider the risk of over exposure to the sun when planning P.E. and other outdoor activities.
- Pupils should be encouraged to take responsibility for their safety in the sun through wearing protective clothing, lotions etc. and through education on the effects of overexposure to the sun.
- All pupils should bring a water bottle to school and have access to it during all lessons and outside play.

SCHOOL TRIPS

Staff organizing our school trips ensure:

- They plan well in advance.
- They seek information about any medical / health care needs which may require management during a school trip. This is specifically relevant for students that may require medication. If medication is needed while on the trip, a Parental Agreement for the School to Administer Medication During a Trip (Appendix G) must be completed by the parents 1 week before the trip.
- That any medication, equipment, health care plans are taken with them and kept appropriately during the trip.
- They do a risk assessment which includes how medical conditions will be managed on the trip. Staff are aware that some students may require an individual risk assessment due to the nature of their medical condition.

HEALTHY EATING POLICY

A separate healthy eating policy is available.

ALLERGIES AND SENSITIVITIES

Parents are responsible for informing the school about their child's allergies and should be indicated in the medical form (Appendix A). If in case a prescribed medicine (antihistamine or EpiPen) is needed for any certain reaction, the parents should coordinate directly to the school nurse and hand over the medicine at the beginning of the school year. The medicine will be kept under the direct supervision and care of the school nurse in the clinic.

NUT POLICY

Although we recognize that this cannot be guaranteed, RGS aims to be a Nut-Free school. It serves to set out all measures to reduce the risk to those children and adults who may suffer an anaphylactic reaction if exposed to nuts to which they are sensitive. The school aims to

protect children who have allergies to nuts yet also help them, as they grow up, to take responsibility as to what foods they can eat and to be aware of where they may be put at risk. We have a policy to not use nuts in any of our food prepared on site at our school. Our suppliers provide us with nut-free products. However, we cannot guarantee freedom from nut traces.

Definition:
Anaphylaxis (also known as anaphylactic shock) is an allergic condition that can be severe and potentially fatal.
Anaphylaxis is your body's immune system reacting badly to a substance (an allergen), such as food, which it wrongly perceives as a threat. The whole body can be affected, usually within minutes of contact with an allergen, although sometimes the reaction can happen hours later.

Symptoms
The symptoms of anaphylaxis usually start between 20 to 60 minutes after contact with the allergen. Less commonly they can occur a few hours or even days after contact.
An anaphylactic reaction may lead to feeling unwell or dizzy or may cause fainting due to a sudden drop in blood pressure. Narrowing of the airways can also occur at the same time, with or without the drop in blood pressure. This can cause breathing difficulties and wheezing.
Other symptoms:

- Swollen eyes, lips, genitals, hands, feet, and other areas (this is called angioedema)
- Itching
- Sore, red, itchy eyes
- Changes in heart rate
- A sudden feeling of extreme anxiety or apprehension
- Itchy skin or nettle-rash (hives)
- Unconsciousness due to extremely low blood pressure
- Abdominal cramps, vomiting or diarrhea, or nausea and fever.

Anaphylaxis varies in severity. Sometimes it causes only mild itchiness and swelling, but in some people, it can cause sudden death. If symptoms start soon after contact with the allergen and rapidly worsen, this indicates that the reaction is more severe.

Staff

- Staff must be aware of at-risk children. A complete list of children with allergies is usually visible and available in the staff common room, each individual classroom and in the clinic.
- Staff must ensure they do not bring in or consume nut products in school and ensure they follow good hand washing practice.
- To be familiar with Epinephrine administration technique.

Parents and Carers

- Parents and carers must notify staff of any known or suspected allergy to nuts and provide all medical and necessary information. This will be added to the child's care plan and if necessary, a meeting will be organized with the school nurse. Homemade snacks or party food contributions must have a label detailing all ingredients present and the kitchen environment where the food was prepared must be nut free. If you are unsure about a selection, please speak to a staff member before bringing the food item into school.
- If the parents report that their child has a nut/legume allergy, they will be required to provide, at minimum, a prescribed antihistamine and/or epinephrine auto-injector (EpiPen) if anaphylactic. The medicine will be kept and readily available in the nurse's clinic for emergency purposes. A form for pre-prepared adrenaline injection administration report must be completed for any adrenaline/epinephrine used (Appendix D)
- The school requests that parents and carers observe the nut-free policy and therefore do not include nuts, or any traces of nuts, in packed lunches.

Children

- All children are regularly reminded about the good hygiene practice of washing their hands before and after eating, which helps to reduce the risk of secondary contamination. Likewise, children are reminded and carefully supervised to minimize the act of food sharing with their friends.

Emergency Response Instructions

Anaphylactic Episode

1. Stay calm and get help – contact the school nurse or any trained member of staff. If possible, the child should be moved to the clinic to properly undertake emergency response management.
2. Administer EpiPen immediately if the child displays any of the symptoms. The EpiPen gives you 15 minutes to seek medical attention. If you are with someone else, have them call 999. If not, administer the EpiPen first and then call 999. After epinephrine administration:

- Lay the students flat and elevate their legs. Do not stand or walk. If breathing is difficult for them, allow them to sit but not stand.
- Reassure the student experiencing the reaction as they are likely to be feeling anxious and frightened as a result from the reaction and the side-effects of the adrenaline. Watch the student closely in case of a worsening condition. Ask another staff member to move other students away and reassure them elsewhere.
- In the rare situation where there is no marked improvement and severe symptoms are present, a second injection may be administered after five minutes, if a second EpiPen is available.

3. Call the ambulance right away (999) and clearly explain that someone is suffering a suspected anaphylactic reaction.
4. While waiting for professional help, Advise the Front Office of the situation, including the need to call the parents ASAP.
5. Follow through in transporting the child to hospital immediately even if symptoms subside.
6. Complete Epinephrine/adrenaline administration report form.

STUDENT ILLNESS POLICY

The intention of this policy is to provide a healthy and safe environment for our students. Some illnesses and situations require a child to be absent from school to prevent the spread of infection to other children and to allow the child time to rest, recover and be treated for the illness. To help keep our children healthy, RGS requires adherence to the guidelines of this policy.

Children will not be allowed to attend school or school related activities if they have anything contagious such as, but not limited to the following:

- FEVER: May return when fever free (under 100 degrees) for 24 hours, without taking fever medication
- DIARRHEA / VOMITING: May return when symptom free for 24 hours
- STREP THROAT: May return after 24 hours of antibiotic treatment and no fever for 24 hours
- CONJUNCTIVITIS (pink eye): May return once the symptoms disappear and eyes are free of discharge
- RING WORM: May return after treatment begins; area should be covered while in school for first 48 hours (about 2 days) of treatment
- IMPETIGO / STAPH / MRSA: May return 48 hours (about 2 days) after treatment starts; wound must be covered with dressing taped on all 4 sides
- COMMUNICABLE DISEASES (such as, but not limited to - influenza, chickenpox, measles, mumps, pertussis, meningitis, mononucleosis): May return when cleared by their medical provider and must provide a Certificate to resume school.

If a student arrives at school with symptoms, or during the school day begins to show symptoms indicative of a condition listed above, a careful assessment will be done by the school nurse. If the nurse believes that it is best for the child to be sent home to rest or to be seen by a doctor, a parent/guardian will be contacted and asked to pick the child up as soon as possible.

The parent/guardian needs to maintain direct contact with the school and the student's

teacher if the child is diagnosed with any communicable disease so the school can take appropriate steps to protect the entire student population.

HEAD LICE

It is parents' responsibility to routinely check and inform school if their child has head lice. If in case the head lice were discovered while in the school, the child may remain in class if it is only nits (egg of the lice) but precaution about head-to-head contact with other students will be emphasized and routinely observed. The school will then notify concerned parents to ensure the treatment will be started when the child comes back home. If the lice are alive and in enormous number, the child will be sent home immediately to avoid infecting other children. Any child with head lice should not return to school unless treatment with medicated head lice product has been started. The school will then issue notices to other parents informing them of an outbreak in school and what action should be taken.

CHILDREN WITH MEDICAL NEEDS OR SPECIAL EDUCATION NEEDS WHO REQUIRE SPECIAL ADJUSTMENTS

Parents have a duty and responsibility to notify the school if their child is suffering from any medical conditions that might affect their overall health and studies if not properly monitored. They should also provide details of any treatment and support they may require in school. Relevant health care professionals will liaise between parents/guardians and school personnel to ensure staff are aware of, and trained to provide, any relevant or emergency support or treatment. An individual health care plan will usually be compiled, detailing the course of action to be taken.

In RGS, General posters about medical conditions (diabetes, asthma, epilepsy, etc.) are recommended to be posted and available in the area where all the staff can easily have access. Each class teacher is also provided with their own individual class list together with the treatment available in the clinic and should be updated regularly.

ASTHMA

This school recognizes that asthma is a widespread, potentially serious, but controllable condition and encourages pupils with asthma to achieve their potential in all aspects of school life.

a) Parents have a duty to inform staff if their child is asthmatic. Preventative inhalers should be provided and labelled with the pupil and class name. These should be kept in the locked cupboard inside the School Clinic.

b) A medicine administration sheet to record the frequency of an inhaler use can be found in each class medical folder.

c) In case of Asthma attack, written first aid instruction on the student's Asthma Action/Care plan given by the doctor are the ones to be followed when administering first aid. If no specific and signed instructions are available, the instruction is unclear, or the person does not have an Asthma Action/Care plan, the standard Asthma Protocol of the school should be administered.

Asthma Attack Protocol
A pupil with asthma symptoms should be placed in an area where he/she can be closely observed. Never send a pupil up to the School Clinic alone. Limit moving a pupil who is in severe distress, call for nurse to come down instead. The pupil should be in a cool, calm atmosphere.

Immediate Assessment
Is there a history of asthma?
If not, consider a different cause: foreign body, croup, whooping cough, pneumonia, bronchitis, hyperventilation.
Is pupil at risk of severe acute attack?
Signs of a particularly severe asthma attack can include:

- wheezing, coughing, and chest tightness becoming severe and constant (younger children may describe this as a tummy ache)
- being too breathless to eat, speak or sleep
- breathing faster
- a rapid heartbeat

Call 999 to seek immediate help if the pupil appears exhausted, has blue/white tinge around lips or has collapsed.

Severe Asthma
1. Sit up straight - do not lie down. Try to keep calm.
2. Administer one puff of pupil's reliever inhaler (usually blue) every 30-60 seconds, up to a maximum of 10 puffs.
3. If a pupil feels worse at any point whilst using the inhaler or does not feel better after 10 puffs or you are worried at any time, call 999 for an ambulance.
4. Contact parents/guardian
5. If the ambulance is taking longer than 15 minutes you can repeat step 2.
If the symptoms improve and you do not need to call 999, an urgent same-day appointment must be made for the pupil to see their GP or asthma nurse.

EPILEPSY

RGS is committed to fully meeting the needs of pupils who have epilepsy, keeping them safe, ensuring they achieve to their full potential, and are fully included in school life.

When a pupil who has epilepsy joins RGS or an existing student is diagnosed with epilepsy, a meeting will be arranged with the parents (and pupil where appropriate) to:

- Discuss the pupil's medical needs, including the type of epilepsy he or she has and the emergency response or intervention during the attack.
- Discuss if and how the pupil's epilepsy and medication affect his or her ability to concentrate and learn, and how the pupil can be supported with this.
- Discuss any potential barriers to the pupil taking part in all activities and school life, including day and residential trips, and how these barriers can be overcome.
- Ensure that both medical prescription and parental consent are in place for the nurse to administer any necessary medication.

Basic Seizure/Epilepsy first aid:

1. Stay calm and track time.
2. Keep the child safe.
3. Do not restrain.
4. Do not put anything per oral/mouth.
5. Stay with the child until fully conscious.

For tonic-clonic seizure (repetitive movement of one or more arms or legs)

1. Protect the head
2. Keep airway open/watch breathing.
3. Roll the child onto their side to keep the airway open and to allow for any fluids in the mouth to flow out.

MEDICAL FORM

Student Name: Gender: Class:
Date of Birth: Age: Height: Weight: Religion (if any): Teacher:
Nationality: ID/Passport Numbe Blood Type (If known
Address:
Town/City: Postal C

EMERGENCY CONTACTS: (Please inform us if any of these numbers change throughout the year as we need to be able to reach a parent/guardian at all time- in case of emergency/illness)

Name: ationship:
Daytime Telephon Mobi Home Telepho

Name: Relationship:
Daytime Telephone: Mobile: Home Telephone:

ALTERNATIVE CONTACTS (If parents cannot be reached)

Name: Relationshi Mobil

*If these emergency contacts cannot be reached, Royal Grammar School may seek emergency treatment for my child. This may involve calling the ambulance and sending students to any nearest hospital or Hama ergency.

Yes: **No:**

INSURANCE

Does your child have medical Insurance? If so, who is your insurance provider?
Policy Number Insurance Emergency Call Centre Nu

*If your child has no insurance policy, please tick the box and sign below.

I acknowledge that my child has no insurance policy and that I will be responsible for any fees incurred due to personal loss or injury.

Signed:

SIBLING(S)

Student Name: Class: Student Name: Class:
Student Name Class: Student Name: Class:

IMMUNIZATIONS

*Please provide a copy of the immunization card and attach it to this form.

If already given but your child has had any new immunization within the last year, please attach a copy of his/her updated immunization record- (otherwise this is not necessary).

SWIMMING AND PE

Are there any doctor's recommended limitation or restriction regarding participation in sports and PE activities like swimming? If yes, please specify and attach the medical certificate.

How would you rate your child's swimming streng

MEDICAL AND DIETARY INFORMATION

Please indicate with a tick if your child suffers any of the following:

☐ Bed Wetting ☐ Seizure of any type ☐ Heart Condition ☐ Travel Sickness ☐ Blood Disorder
☐ Epilepsy ☐ Sleepwalking ☐ Asthma ☐ Recent breaks or sprains ☐ G6PD deficiency
☐ Diabetes ☐ Migraine headaches ☐ Allergies ☐ Fainting ☐ Others
☐ My child has been in contact with or has suffered from a contagious or infectious disease in the last four weeks

Please include detailed information regarding the health condition selected above and of any other health condition not listed

Does he/she require medication to be kept at school to treat allergic reactions? If yes, please supply them at the start of the school year. EpiPens will be kept in the nurse's office unless instructed otherwise by the parents.

MEDICATION

Is your child taking any regular (daily) medication at home? Yes ☐ No ☐

Name of Medicine:

Dosage:

Reason for taking the medication:

Does your child need to take medications while inside the school? Yes ☐ No ☐

If yes, please ask for **a PARENTAL AGREEMENT FOR SCHOOL TO ADMINISTER MEDICATION** form available in the school clinic.

Please note that All medicines prescribed outside that needs to be given at school must have a completed consent form filled in by a parent before any medication will be given- **NO FORM-NO MEDICINE!** All medications must be in the original container with pupil's name, name of medicine, dosage, and frequency.

*All medicines must be handed directly to the school nurse by a parent or guardian at the beginning of the school day.

NON-PRESCRIPTION MEDICATIONS

I give permission for my child to receive the following medications at school if necessary:

NAME OF MEDICINE	YES	NO	NAME OF MEDICINE	YES	NO
Paracetamol (for fever, aches/pain)			Otrivine Nasal Drops (for nasal congestion)		
Ibuprofen (for fever, aches/pain)			Betadine solution (for cleaning cuts, scrapes, antiseptic)		
Zyrtec Syrup (for mild allergic reaction, hives, and itching)			Mebo Cream -contains sesame (for minor burns, cuts, and scrape)		
ENO Salt (for stomach upset due to gas pains) Applicable for children older than 12 y/o			Bepanthen Antiseptic cream (for minor wound such as small cuts/scratches, abrasion, blisters, fissures, mild burn, and pressure sore)		
Strepsils Lozenges (for sore throat)			Calamine Lotion (skin itchiness due to insect bite or sting)		
Relispray/Voltaren Gel/Reparil Gel (For minor muscle and joint aches/pain)			Motilium (for nausea and vomiting)		
Prospan (cough syrup with ivy leaves extract)			Maalox (for stomach acid/heartburn)		
Oral Rehydration Salts-ORS (replacement of fluid and electrolytes loss due to diarrhea and vomiting)			Others: (Please Specify)		
Fenistil Gel (Insect Bite)					

Parent/Guardian Name: _____ Signature: _____ Date: _____

Appendix B

PARENTAL AGREEMENT FOR SCHOOL TO ADMINISTER MEDICATION

The school will not administer any medication from home to your child unless you complete and sign this form.

DETAILS OF PUPIL

Surname _____

Forename(s) _____

Date of Birth _____

Address _____

Medical condition or illness

_____

MEDICINE

Note: medicines must be in the original container as dispensed by the pharmacy

Name/type of medicine (as described on the container) _____

Date dispensed/prescribed _____

Expiry date _____

How long will your child need to take this medication in school? _____

Dosage and method of administration _____

Timing: _____

Self-administration YES / NO _____

Special precautions _____

Side effects _____

Procedures to take in an emergency

_____

Signature of parent/guardian _____

Date _____

ALL MEDICATONS MUST BE DELIVERED TO THE NURSE'S ROOM BY THE PARENTS OR GUARDIAN, NOT BY THE STUDENTS BEFORE SCHOOL STARTS AND MUST NOT BE KEPT IN THE STUDENT'S BAG.

I accept that this is a service that the school is not obliged to undertake.

I will inform the school in writing if there is any change in dosage or frequency of administration of the medication or if the medicine is stopped.

NO MEDICATION WILL BE GIVEN AT SCHOOL WITHOUT THIS FORM BEING COMPLETED

_____ Signature of the School Nurse:

_____ Date:

Appendix C

RECORD OF MEDICINE ADMINISTERED TO AN INDIVIDUAL CHILD

NAME OF STUDENT:
YEAR/SECTION:
MEDICINE:
ROUTE:
DOSE, FREQUENCY AND TIMING:
INDICATION FOR GIVING MEDICINE:
HOW LONG TO TAKE THE MEDICINE:

DATE	TIME	DOSE	PERSON WHO ADMINISTERS THE MEDICINE	SIGNATURE	COMMENTS/REMARKS

Appendix D

PRE-PREPARED ADRENALINE INJECTION ADMINISTRATION REPORT FORM

NAME OF CHILD:……..

DOB: ……

DATE OF ALLERGIC REACTION: / / TIME REACTION STARTED:

……

TRIGGER: ……

DESCRIPTION OF SYMPTOMS OF REACTION:

……..

TIME ADRENALINE INJECTION GIVEN……

DEVICE USED (Circle): EpiPen / EpiPen Junior / Anapen / Anapen Junior / Others……

Site of injection: ……..

Given by: ……

Any difficulties in administration?

……

TIME AMBULANCE CALLED: ……

ARRIVED: ……

ANY OTHER NOTES ABOUT INCIDENT (e.g. child eating anything, other injuries to child)

……

WITNESSES: ……..

FORM COMPLETED BY:

NAME (print): ……

SIGNATURE: ……

Job title: ……

Contact Tel no: ……

Date: ……

Appendix E

Student Medical/Accident/Injury Form

Date: Name of Student: Class:
Time Arrived in Clinic: Time Left Clinic:

REASON FOR VISIT / COMPLAINT:

(Please Highlight)

Toilet Accident	Stomachache	Vomiting	Diarrhea	Nausea
Breathing Problems	Cut/Scrape/abrasion	Skin Rash	Insect Bite	Mouth/Dental
Eye Injury/Irritation	Nosebleed	Cold Symptoms/Cough	Headache	Bump/Swelling
Earache	Sore Throat	Head Lice	Dizzy/Lightheaded	Head Injury
Bump	Joint Pain			
Other (Please State)				

ADDITIONAL INFORMATION:

(Location/Cause of injury, Details of incident, Nurse Observation)

TREATMENT PROVIDED:

(Please Highlight)

Cold Pack	Plaster/Dressing	Bandage	Soap/Water	Antibiotic Cream
Other (Please State)				

ADDITIONAL INFORMATION:

(Details of treatment)

PARENT PHONED:

(Please Highlight)

Yes	No	
Name of person contacted		
Completed Call	Message Left	Unable to contact

FINAL ACTION:

(Please Highlight)

Student returned to class	Student waiting in clinic for parent to collect	Bandage	Soap/Water	Plaster/Dressing	Antibiotic Cream
	Other (Please State)				

Appendix F

Head Injury guide and instructions:

Your child was thoroughly assessed and although no problems were seen at the time, we request that you observe your child for the next 24 hours and contact your family doctor or the nearest Accident and Emergency department if you notice any of the following symptoms:

- Severe Headache or “pressure” in head
- Nausea or vomiting
- Balance problems or dizziness
- Fatigue or feeling tired
- Blurry or double vision
- Sensitivity to light or noise
- Numbness or tingling
- Does not “feel right”
- Unusual Drowsiness
- Irritable
- Slurred speech
- Bleeding or fluid from ears or nose
- Fits/Seizure

*Please contact me if you have any questions. (40360453-Nurse Office)

Appendix G

Dear Parent/Guardian,

Please carefully read the following procedure that must be followed for the administration of medication to students who take part in either day or overnight field trips sponsored by the Royal Grammar School Guildford in Qatar:

*Please send **only** essential medications on the field trip. * The administration of medication to students shall be done only when the student's health may be jeopardized without the medication.

1. If the school nurse accompanies students on a trip, she will be responsible for medication administration unless otherwise noted.
   If the school nurse does not accompany students on a trip, the student's teacher or other designated school employee will be responsible for medication administration, including inhalers and emergency medications such as EpiPen.
   Everyone designated to administer medications will receive special administration instruction/training from the school nurse.

2. Only medications that are "medically necessary" should be requested for administration. As much as possible, please refrain from requesting administration of multivitamins, herbal or dietary supplements during the trip.

3. A "Parental Agreement for School to Administer Medication During a Trip" form which is shown below must be submitted by the parent for **each** medication (all prescription and over-the-counter medications) that will be needed during the trip. Forms must be completed in their entirety.

4. **All medication forms and consents must be returned to the school nurse no later than 1 week before the trip.** This will allow time for the nurse to review and collate the information to give to the administrator.

5. The parents will provide the school nurse with the original, labelled prescription bottle with the appropriate amount of medication in it. Bottles containing medication that exceeds the number of days of the trip will not be accepted. Medications in baggies, or in unlabeled or incorrect bottles will not be accepted. The medication must match the bottle it is in. Daily medication logs will be completed by the person designated to administer medication on the trip.

6. If parents accompany their children on the trip, they will be responsible for the administration of medication to their own child. If this occurs, the individual designated to administer medications will document parent administration of the medication on the daily medication log.

7. To meet unforeseen minor medical concerns (e.g., headache and/or fever), the administrator in charge of the field trip will have a stock supply of over-the-counter medicines, as listed below, that he or she can give students with written permission from their parent to receive the medicines.

PARENTAL AGREEMENT FOR THE SCHOOL TO ADMINISTER MEDICATION DURING A TRIP

Student Name:	**Date of Birth:**	**Year/Section:**

I am giving permission for the administration of listed medication(s) to my child as per the following:

1. PRESCRIBED MEDICINE

Requires medication to be in its original container with the prescription label; Prescription must be written by the licensed Physician. Dosage/Direction must be consistent with providers written prescription.	
Medication Name:	Dosage:
Reason for taking Medication/Medical Condition:	
Route: ☐ Mouth (oral) ☐ Skin (Topical) ☐ Ear ☐ Inhaled ☐ Eye ☐ Others: ☐ Nose (Nasal)	*Tablets requiring cutting should be cut by the parents before being brought to school. Liquid medications require dosage spoons which are available from your pharmacist, and must also be supplied by parent.*
Time of day to be taken:	☐ As needed (PRN)
Side Effect to be aware of/other information:	

2. NON-PRESCRIPTION MEDICINE (Over the counter drugs)

NAME OF MEDICINE	**YES**	**NO**	**NAME OF MEDICINE**	**YES**	**NO**
Paracetamol (for fever, aches/pain)			Otrivine Nasal Drops (for nasal congestion)		
Betadine solution (for cleaning cuts, scrapes, antiseptic)			Mebo Cream -contains sesame (for minor burns, cuts, and scrape)		
Fenistil Gel (Insect Bite)			**Other Non-Prescription Medicine:** (Please specify) e.g., Vitamins, cough syrup etc. _____		

Signature:_____ Relationship: _____ Date: _____