

Request for additional medication advice

Dear Health Practitioner

Re: Request for additional advice regarding medication you have prescribed

To enable the medication you have prescribed to a student enrolled at my school to be administered safely by school staff, please provide the following written information **<tick all that are applicable>**:

<input type="checkbox"/>	a completed and signed Asthma Action Plan
<input type="checkbox"/>	a completed and signed ASCIA Anaphylaxis Action Plan
<input type="checkbox"/>	a medication order for insulin
<input type="checkbox"/>	a diabetes management plan – Note: This request may be referred to the student’s diabetes treating team if they are responsible for the ongoing management of the student’s condition
<input type="checkbox"/>	a <i>Medication order to administer ‘as-needed’ medication at school</i> (see attachment)
<input type="checkbox"/>	written instructions to indicate that you have changed this student’s dosage of medication (to override pharmacy label instructions).

Please refer to the attached information entitled *Administration of medications in Queensland state schools: Information for parents/carers and health practitioners* for more detailed advice about this request.

Thank you for your assistance.

Yours sincerely

The Principal

<insert name of school>

<insert date>

Enc. Copy of *Administration of medications in Queensland state schools: Information for parents/carers and health practitioners* information sheet