

## Cough Drop/Throat Lozenge Authorization Form

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

Cough drops may be administered to elementary students without a doctor's order if the following guidelines have been met:

1. The cough drops/lozenges are provided by the parent/guardian.
2. The cough drops/lozenges are housed in the health office.
3. A written request can be honored for the first day of use.

After the first day, this permission slip must be signed and returned.

\*Parents/guardians, please discuss choking hazard and correct cough drop/ lozenge use with your child (no running with a cough drop in your mouth, etc.).

I, the parent or guardian have discussed the correct use/choking hazard of cough drops/lozenges with my child, and release liability risks associated with cough drop/lozenge use from the school.

I give my permission for the above named child to have cough drops in school.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_