## Acetaminophen/Ibuprofen Consent Form

## Administered by School Nurse

Acetaminophen and ibuprofen may be administered in the Health Office by the school nurse with written parental consent for mild to moderate pain. It may also be administered for fever greater than 100.4 while awaiting parent pick up. Doses of acetaminophen and ibuprofen will be calculated based on your child's weight. The nurse can administer up to one dose per school day (not to exceed 2 doses per week).

I consent for my child,					_, to receive
acetaminophen / ibuprofer	ı.				
Parent Signature				Date	
If you anticipate that your medication more than twice Request for Medication for	ce per we	•		-	need either
Student Weight (student m	ay also b	e weighed by so	rhool nurse)		
Allergy to acetaminophen	Yes	or No			
Allergy to ibuprofen	Yes	or No			
Does your child take any p	rescriptio	n or over the co	ounter medication on	a regular basis?	
	Yes	or No			
If yes, please list:					
			a Chart		

Child Weight	Acetaminophen Dose Ibuprofen Dose		
18-23 lbs	3.75ml of 160mg/5ml liquid	4ml of 100mg/5ml liquid	
24-35lbs	160mg (liquid or chewable)	100mg (liquid or chewable)	
36-47lbs	240mg (liquid or chewable)	150mg (liquid or chewable)	
48-59 lbs	320mg (liquid or chewable)	200mg	
60-71 lbs	325mg tab or 400mg (chewable/liquid)	250mg (liquid or chewable) or 200mg tab	
72-95 lbs	500mg or 480mg (chewable/liquid)	300mg (liquid or chewable) or 200mg (1.5 tabs)	
Over 95lbs	500mg or 650mg	400mg	