

Sample

Medication Administration Record with Receipt and Count Logs

Click or tap here to enter text. School DistrictClick or tap here to enter text. School Year

Student Click or tap here to enter text. Birth date Click or tap to enter a date. Grade Click or tap here to enter text.

Medication Click or tap here to enter text. Dosage Click or tap here to enter text. Route Click or tap here to enter text.

Directions (# taken; time taken; time between doses; length of time to take): Click or tap here to enter text.

Medication Application Click or tap here to enter text.

Date Medication Administration Starts Click or tap here to enter text.

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Aug																															
Sept																															
Oct																															
Nov																															
Dec																															
Jan																															
Feb																															
Mar																															
Apr																															
May																															
June																															
July																															

SIGNATURE CODE

Initials:Click or tap here to enter text.	Signature:Click or tap here to enter text.
InitialsClick or tap here to enter text.	Signature:Click or tap here to enter text.
InitialsClick or tap here to enter text.	Signature:Click or tap here to enter text.
InitialsClick or tap here to enter text.	SignatureClick or tap here to enter text.

CODES

WE: Weekend	F: Field Trip
H: Holiday	D: Early Dismissal
A: Absent	W: Dose Withheld
N: None available	O: No Show
L: Late Start	Other: Explain on back