

RHS Band Nurse
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Information for Parents/Guardians of Band and Guard members:

Band Camp is physically challenging. Please consider sending an OTC Medication Permit to camp for a pain reliever you prefer for your student. We will have Tylenol and Motrin available at camp; you do not have to send a bottle of Tylenol or Motrin to camp.

The following form titled “Medical Summary for Band Nurse” is REQUIRED to be filled out and handed in to the nurse, EVEN IF your child is not taking any medication. This form assists the nurse in many ways, so please double check medical needs and medications required at camp. Parents will be notified by phone of injuries and illnesses that required more than basic first aid or if the student has a fever.

Medications: According to Ohio State Law, all medications for school activity use require a Medication Permit.

- Prescription Medication Permits need parent and a physician signature.
- Over the Counter (OTC) Medication Permit can be filled out by the parent.
- A different form is needed for each medication.
- All medications must be in the original bottle, labeled with the student’s name, dosage and time given.

Both permits can be found on the band website under Band Camp Forms/Optional Forms. The forms will be good for entire school year. If the parent is at Band Camp and will be administering the medication themselves, a Medication Permit is not required.

Please put all medication bottles together in a ziploc bag marked with the student’s name. These should be handed in to the nurse during drop-off for Band Camp. Medications will be held by the nurse at all times. Please encourage your student to be responsible and see the nurse to obtain the medication when it is scheduled to be taken.

- Please let the nurse know if your child is a diabetic, or is taking attention enhancing medication, antidepressants or anti-anxiety medications.

Reminders
Old injuries: Bring your braces and/or wraps.
Asthma: You MUST carry your inhaler with you at all times
Allergies to bee/wasp stings: If you have an epi-pen, tell the nurse and carry it with you.
Diabetes or low blood sugar: Notify the nurse so that she is aware of your medical needs.

Medical Summary for Band Nurse: All parents should fill out and sign.

Student Name:			
Please list all medications (prescription and OTC) your student will be taking at Band Camp below.			
Medication	Dosage	Time to be given	Special Instructions

* Please complete Medication Permits for EACH Medication listed above, including a physician's signature on Prescription Medication Permit.

Student is asthmatic and carries an inhaler.	Yes	No
Student is allergic to bee/wasp stings and carries an epi-pen.	Yes	No
Student is diabetic or experiences low blood sugar symptoms.	Yes	No
Parent will be chaperoning Band Camp.	Yes	No
Other concerns: (ie: back brace, weak ankles, concussion headaches)		

<p>NOTICE OF PRIVACY PRACTICES Ross High School Band Medical Volunteer Staff</p> <p>We respect our legal obligation to keep health information that identifies you private. We are obligated by law to give you notice of our privacy practices. This notice describes how we protect your health information. All medical information given in both written and verbal form to Ross High School Band Nurse(s) will be kept private and shared only when necessary with other medical personnel essential to the student's medical needs. If you have any questions, speak with the Ross High School Band Nurse(s). The band directors will be informed of life threatening medical issues regarding your student unless you state otherwise.</p>
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I have read the **NOTICE OF PRIVACY PRACTICES** supplied by the Ross High School Band Nurse.

_____ Date

Parent/Guardian Signature

Phone Number: _____ (day) _____ (evening)