

Medical conditions action plan

Date		Kindergarten service	
		Kindergarten group	
Student name			
Date of birth			
Parent or guardian 1		Photo	
Contact number			
Parent or guardian 2			
Contact number			
Emergency contact			
Contact number			
Doctor or medical service name			
Contact number			
List medical condition(s)	Medication(s) if appropriate		
1.	1.		
2.	2.		
3.	3.		

Are medications needed at kindergarten? YES NO

Medication	When needed (time or symptoms)	Dosage

Other actions which may be needed

Possible side effects of medication to look out for

Medical conditions action plan

Food restrictions and drug allergies			
Activity restrictions			
Please list any other concerns or matters you wish us to be aware of in regard to your child's condition			
Emergency management			
What should we look out for with regard to your child's condition (symptoms)			
Should this occur at kindergarten list the steps that should be taken			
1.			
2.			
3.			
4.			
5.			
Parent or guardian signature		Date	
Medical practitioner signature		Date	

Disclaimer

1. It is the responsibility of parents or guardians to advise start; stop; continuity of the Medical Condition Plan (MCP) and provide updates as soon as practicable.
2. It is the responsibility of parents or guardians to provide primary care. Educator's role is limited to that of providing assistance to parents or guardians.
3. Should there be reported difficulty or refusal by child, parent or guardian will be notified and implementation of MCP by educator will cease.
4. Parents or guardians consent to the display of MCP in publicly visible area of kindergarten and staff room.
5. Medication is administered in accordance to the instructions or prescription by 2 staff members (one to administer; one to verify compliance) and signed off each time medication is administered.

Some drug administration requires specific training - parents or guardians will be informed if staff are not able to administer drug due to incomplete training.