

Eugene A. Tighe Middle School

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Mrs. Palamaro RN

School Nurse

At times your child could need an Advil or antacid to help them get through the school day. Braces discomfort, cramps, headache, etc. could prevent your child from being on task in the classroom. To alleviate this problem, you have the option of completing the following checklist of medications that could be given to your child by the school nurse during the school day. Please note that these medications will only be dispensed with your permission.

Please check the spaces below for all that apply. I give permission for my child, _____ to receive:

1. Advil one tablet/200mg _____
2. Advil two tablets/400mg _____
3. Antacid (Tums)one dose _____
4. Cough Drop – (Halls-type) _____
5. Tylenol (1 tabs- 325mg) _____
6. Tylenol (2 tabs- 650mg) _____

Parent/Guardian Signature: _____ Date: _____

Please note: you will be called for any condition that is more than a simple headache, slight pain or stomach ache or a condition that persists.

This permission is valid for the school year 2015-2016.

If you have questions or concerns, please feel free to call me during the school day.

Thank You