|  |  |  |  |
| --- | --- | --- | --- |
| Child’s name |  | Child’s date of birth |  |
| Children’s Home |  |  |  |
| Medication is supplied in original packaging with label identifying the child and the administration instructions | | |  |

This form must be used to log the quantities of a child’s medications when they are leaving or entering a children’s home, including if they are transferred to hospital.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Date | Name of medication | Form of medication  ie. liquid/tablet | Strength of medication | Quantity | Name & signature of staff receiving medication | Role / location |
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