

**St. James High School Based Health Center  
School Year 2022 – 2023**

**THE FOLLOWING IS A LIST OF MEDICATIONS THAT MAY BE ADMINISTERED BY THE  
NURSE PRACTITIONER IN THE COURSE OF TREATING YOUR CHILD.**

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| <p><b><u>Medications for pain:</u></b></p> <ul style="list-style-type: none"> <li>• Ibuprofen</li> <li>• Naproxen</li> <li>• Acetaminophen</li> <li>• Theragesic Rub</li> </ul>   | <p><b><u>Medications for allergies:</u></b></p> <ul style="list-style-type: none"> <li>• Benadryl</li> <li>• Loratadine</li> </ul>  |
| <p><b><u>Medications used for colds &amp; stuffy nose:</u></b></p> <ul style="list-style-type: none"> <li>• Advil Allergy/Congestion</li> <li>• Dayquil Severe Cold &amp; Flu</li> <li>• Chloraseptic Throat Lozenges</li> </ul>  | <p><b><u>Medications to relieve coughing:</u></b></p> <ul style="list-style-type: none"> <li>• Robitussin Cough Syrup</li> <li>• Robafen Cough Syrup</li> <li>• Cough Drops</li> </ul>  |
| <p><b><u>Medications to cleanse wounds or eyes:</u></b></p> <ul style="list-style-type: none"> <li>• Normal Saline</li> <li>• Betadine Solution</li> <li>• Hydrogen Peroxide</li> <li>• Isopropyl Alcohol</li> <li>• Triple Antibiotic Ointment</li> <li>• Eye Wash Solution</li> <li>• Xylocaine 1% or 2% Subcutaneous</li> </ul>  | <p><b><u>Medications for stomach:</u></b></p> <ul style="list-style-type: none"> <li>• Pepto Bismol</li> <li>• Gas-X</li> <li>• Emetrol</li> <li>• Loperamide Hydrochloride</li> <li>• Tums</li> <li>• Famotidine</li> </ul>  |
| <p><b><u>Medications for Eyes/Ears/Mouth</u></b></p> <ul style="list-style-type: none"> <li>• Ear Wax Treatment Drops</li> <li>• Antipyrine and Benzocaine Otic Solution</li> <li>• Ketorolac Tromethamine Ophthalmic Solution</li> <li>• Artificial Tears</li> <li>• Oral Lidocaine</li> <li>• Orabase</li> </ul> <p><b><u>Medications for Skin</u></b></p> <ul style="list-style-type: none"> <li>• Triamcinolone Acetonide Cream</li> <li>• Clotrimazole Cream</li> <li>• Caladryl</li> <li>• Vaseline</li> <li>• Aloe Vera</li> </ul> | <p><b><u>Other Medications:</u></b></p> <ul style="list-style-type: none"> <li>• Azithromycin</li> <li>• Ceftriaxone</li> <li>• Depo-Medrol</li> <li>• Albuterol 0.083% (nebulizer)</li> <li>• Xopenex 0.63 mg (nebulizer)</li> <li>• Ammonia Inhalant</li> <li>• Normal Saline</li> <li>• Lactated Ringers</li> <li>• D5W Solution</li> <li>• Aspirin</li> <li>• Nitrostat</li> <li>• Epinephrine</li> <li>• Oral Glucose</li> <li>• Glucagon</li> <li>• Oxygen</li> </ul> |

**\*\*NOTE: GENERIC FORM MAY BE SUBSTITUTED**

I UNDERSTAND AND AGREE THIS STUDENT MAY RECEIVE ALL MEDICATIONS OFFERED AT THE SCHOOL-BASED HEALTH CENTER **EXCEPT** THOSE WHICH I HAVE WRITTEN HERE:

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Student Name and Grade

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Parent/Legal Guardian Signature & Date