

# Medication Log for Prescription and Non- Prescription Medications

BEFORE administering a new psychotropic medication FCSVA MUST have the Consent to Administer and prescription on file. Please Print Clearly

Child: \_\_\_\_\_ Month and Year \_\_\_\_\_ Day of Month \_\_\_\_\_ Page \_\_\_\_\_ of \_\_\_\_\_

Time Given	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Name of Medication:																															
Dosage and number times a day																															
Does FCSVA have a copy of prescription on file?																															
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**Each time** the medication is given, you must put in your initials. If child refuses medication, mark an R for refusal. If there is an error with administration mark box with an E. Make sure to explain on the back and call your child's Case Manager the on-call pager FCSVA must have a copy of all prescriptions on file. Due by the Fifth of the Next Month