



Piedmont High School
Dylan Stamey, Principal
3006 Sikes Mill Rd.
Monroe, NC 28110
Phone 704.296-3170
Fax 704-753-2815
<http://piedmont.ucps.k12.nc.us>

02/02/2026

Dear Parents,

This letter is regarding medication for students on school field trips. If your student should require medications on an overnight trip, then we are required to follow the same procedure as medications taken during the school day. Medications that are currently maintained for your child at school will be sent with UCPS staff members and do not require additional medication consent submission.

- 1) **We require a Medication Consent Form completed by the doctor and the parent for medications to be taken and administered on the field trip.**
- 2) **We need the medication supplied for the field trip in a properly labeled, original container.**
- 3) **ALL medication will be kept with and administered by a staff member going on the trip. (ONLY inhalers, EpiPens, and glucagon may be self-carried by the student with the self-carry form SIGNED by the doctor and the parent)**
- 4) **Please review the information below regarding medications at school and on extended field trips.**

ALL MEDICATION FORMS ARE DUE TO THE SCHOOL NURSE BY: March 6, 2026.

Medication Administration

- Medication must be sent in the original container if it is an over-the-counter medicine or a labeled prescription bottle if it is a prescription medicine.
- Please check that the medication is NOT expired.
- Send ONLY the number of pills that are actually needed to be given on the trip.
- **Signatures from a parent/guardian AND the student's health care provider are required for ANY medication to be given at school. This includes prescription as well as over the counter medications.**

ALL MEDICATIONS FOR THE TRIP SHOULD BE GIVEN TO MRS. CROSSLEY THE MORNING OF DEPARTURE. If you have questions or concerns, please contact the school at 704-296-3170. I will be happy to speak with you.

Sincerely,

Lisa Young, BSN, RN, NCSN
School Health Nurse

Growing Possibilities...



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I have reviewed this letter and am aware of the UCPS Medication Policy. My child does not require medications on this field trip.

Student Name: _____ Date: _____

Parent Name (please print) _____

Parent Signature _____ Date: _____

Growing Possibilities...

In compliance with federal law, UCPS administers all educational programs, employment activities and admissions without discrimination against any person on the basis of gender, race, color, religion, national origin, age or disability.

