



# PERMISSION TO DISPENSE EXTERNAL PREPARATIONS



(Topical Ointment/Lotion/Powder)

Authorization must be provided for staff to apply topical ointments, topical teething ointment or gel, insect repellents, lotions, creams, and powders, such as sunscreen, diapering creams, baby lotion, and baby powder.

Item must be provided in its original container and labeled clearly with the child's first and last name and classroom. Staff will keep items out of reach of children when not in use.

Prescription Medicated Creams/Lotions require a Medication Authorization Form to be completed.

*Please do not send any of these items in your child's bags/book bags.  
All items must be given to management upon arrival along with this completed form.*

Child's Name \_\_\_\_\_ Today's Date \_\_\_\_\_

From \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(Permission may be given for up to 12 months)

**~Parents are required to provide the center with such items~**

- Baby Wipes
- Band-aids
- Neosporin or similar ointment
- Bactine or similar first aid spray
- Sunscreen
- Insect Repellent
- Non-Prescription Ointment (such as A&D, Desitin, Vaseline)
- Baby Powder
- Other (please specify) \_\_\_\_\_
- Other (please specify) \_\_\_\_\_

**Apply to:**

- All Exposed Skin
- Face Only
- Diaper Area
- Other (specify) \_\_\_\_\_

Reason for use: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**When:**

- Before going outside
- After each diaper change
- After a bowel movement
- Other (specify) \_\_\_\_\_

*(we CANNOT accept "as needed")*

***This form should be placed in the child's file and a copy provided to the classroom with the item above.***

I give permission to Discovery Point to apply the medication listed above as instructed above. I have completed this form and management has received the item listed.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_  
Owner/Director Signature \_\_\_\_\_ Date \_\_\_\_\_