

**Non-Prescription Medication Products  
Authorization Only**

FORM M-400

All over-the-counter (OTC) products need parental permission for administration. However, some of these external products do not need to be documented every time you use them. The following is a list requiring parental permission only.

**TO BE COMPLETED BY PARENT**

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_  
Program Name: \_\_\_\_\_ Today's Date: \_\_\_/\_\_\_/\_\_\_

The following external products may be applied to my child in accordance with the manufacturers instructions on the original container:

- \_\_\_\_\_ Diaper wipes
- \_\_\_\_\_ Diaper creams, ointments
- \_\_\_\_\_ Skin lotions/creams/vaseline: specify if special brand: \_\_\_\_\_
- \_\_\_\_\_ Baby oil; (baby powder is not recommended due to inhalation hazards)
- \_\_\_\_\_ Soap, Brand Name: \_\_\_\_\_
- \_\_\_\_\_ Sunscreen: specify if special brand: \_\_\_\_\_
- \_\_\_\_\_ Insect repellants: specify if special brand: \_\_\_\_\_
- \_\_\_\_\_ Lip balm
- \_\_\_\_\_ Chemical hand sanitizers
- \_\_\_\_\_ Toothpaste (an internal product but does fall under this category)
- \_\_\_\_\_ Other - please specify: \_\_\_\_\_

NOTE: Teething gels are considered OTC medications not products (use **Form M-200**) Teething gels are not recommended and need to be used with extreme caution. They have been known to numb the throat which causes a potential choking hazard.

**Parents/Guardian's signature required:** \_\_\_\_\_

\* Unused products: Returned to parents? Yes / No **or**, discarded appropriately (circle one)

by: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

**\*Keep this form in the child's file when medication is finished.**

***All oral OTC medications need Prescription (Form M-200) or Non-Prescription (Form M-300) Medication Authorization/Administration Form completed.***