ALATEEN MEDICATION LOG

Alateen Name: _____

Event Name and Date(s): _____

Date	Medication	Reason Given (Routine / Symptom)	Dose Given	Time AM / PM	DMA Initials	AMIAS Initials	Alateen Initials	Side Effects / Notes

DMA: _____ _____

Signature Print Name

A Designated Medical Administrator (DMA) is a health care professional licensed to administer medication and hired through an agency.
If there are any questions, concerns, or uncertainty regarding any medication or the instructions associated therewith, the DMA must immediately contact the custodial parent/legal guardian of the Alateen and document the content of such conversation in the Medication Log.

This form will be completed by the DMA and turned in to the Registration Chair at the close of the event. The Registration Chair will send this form to the AAPP for secure retention.