DEPARTMENT OF HEALTH AND FAMILY SERVICES
Division of Health Care Financing
HCF 1199 (Rev. 12/04)

STATE OF WISCONSIN

WISCONSIN MEDICAID

OPTIONAL SCHOOL-BASED SERVICES ACTIVITY LOG
MEDICATION ADMINISTRATION

Name — Student (Last, First, MI)	Name — School	Method Used (Circle One) **Time** **Task**

Date of Service (MM/DD/YY)	**Medication Name and Dose**	**Route**	**Time Administered** (Time or Units)	**Took Medication Without Difficulty?** (Yes or No)	**Notes** (All Exceptions Must Be Noted)	**Initials or Signature*** (Of Person Who Administered Medication)

*Initials Key	Signatures — Corresponding Staff	Date Signed (MM/DD/YY)

Under Standards of Practice for Registered Nurses, ch. N 6.03, Wis. Admin. Code, only registered nurses (RNs) may delegate services to medically unlicensed individuals. For delegated nursing services under the school-based services benefit, the RN responsible for delegating the services must agree to the delegation of the service and is responsible for supervision of the delegatee.