



DEPARTMENT OF THE ARMY  
UNITED STATES ARMY GARRISON - WIESBADEN  
UNIT 29623  
APO AE 09096

REPLY TO  
ATTENTION OF

IMWB-MWC

20 Jan 2017

MEMORANDUM FOR: Parents with children who require medication while attending Child, Youth and School Services

In accordance with the Army Regulation titled, ' Operations Manual' if your child requires medication while attending Child, Youth and School Services programs, the medication must be in the original container with a childproof cap. Each medication container must be labeled with the date of issue, child's first name and last name, the Health Care Provider's name, name of the medication, dosage, method of administration, and instructions for use.

All prescriptions must be in English or have a translation provided by the prescribing Host Nation Health Care Provider. The information must match the child's Medical Action Plan and Health Assessment/Sports physical.

If your child receives medical services from a Host Nation Health Care Provider, please take this memo and ask the bottom portion to be completed for each medication your child needs.

For routine medications with a stop date such as antibiotics, please ensure your child has taken the medication 24 hours before the program can administer it to your child.

If you have questions, please contact the Child, Youth and School Services Health Nurse, Whitney Schindewolf, at DSN 548-9358, CIV 0611-143-548-9358.

Whitney Schindewolf, RN. BSN, MBA  
CYS Services Health Nurse

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Date of Issue: \_\_\_\_\_

1. Child's first and last name: \_\_\_\_\_
2. Name of Medication: \_\_\_\_\_  
(Must match the original medication container or package and Medical Action Plan)
3. Dosage of Medication: \_\_\_\_\_
4. Method of Administration: \_\_\_\_\_
5. Instructions for use: \_\_\_\_\_

**\*\*May administer second dose of Epinephrine after (15 or less) \_\_\_\_ minutes if symptoms worsen or do not resolve**

**\*\*Please note- CYS now requires 2 Epi-pens/Epi-pen Jr/ Fastjekt/Fastjekt Jr**

6. Physician's Full Name, telephone number and stamp: \_\_\_\_\_