

Friday, 02 August 2019

Circular No.: -SGS/Admn/ 028/2019-20

Classes :- I to V

**Subject: Administration of De-worming Tablet**



Dear Parent

As per the directions received from the Ministry of Health & Directorate of Education, all the schools of Delhi region are requested to assist in administering tab. Albendazole 400mg (chewable tablet), as an initiative towards deworming the children.



The single dose in the tablet form will be administered to the children in the presence of the class teacher and School Medical Assistant on **National Deworming Day i.e. 08<sup>th</sup> August 2019**. In case any child is absent on 08<sup>th</sup> August, the medicine will be administered on 16<sup>th</sup> August 2019. As per the ministry of Health and GNCT of Delhi, the tablet is totally safe for the students. Since the medicine cannot be given on empty stomach, you are requested to kindly ensure that your ward eats something before coming to school.

Please note that the medicine **should not be administered** to the children who complain of stomach ache /vomiting on the day of administration or the children who have a history of allergy, asthma or are under any other medication.

Kindly fill in the consent form or intimate any reservations you may have for the same and send to the class teacher latest by 6<sup>th</sup> August 2019.

Regards

**Sumana Dutta Sarkar**  
**Head of School**

**CONSENT FORM**

I allow my ward \_\_\_\_\_ of class \_\_\_\_\_ sec \_\_\_\_\_ to be administered Albendazole 400mg (chewable tablet) as a part of National Deworming Day initiative of Ministry of Health and Family Welfare and DOE.

I also declare that my ward is not

- |                               |                          |
|-------------------------------|--------------------------|
| 1. Allergic                   | <input type="checkbox"/> |
| 2. Asthmatic                  | <input type="checkbox"/> |
| 3. Under any other medication | <input type="checkbox"/> |

Signature of Parent / Guardian \_\_\_\_\_

Name of Parent / Guardian \_\_\_\_\_

Date \_\_\_\_\_