

Emergency Plan for Overnight and Extended Trips Outside of the Washington Metropolitan Area

- Arrangements for medical needs:

_____ Consult with nurse/health technician regarding students taking medications during the day

_____ MCPS Form 525-13 Authorization to Administer Prescribed Medication (attached)

_____ Name of staff member(s) in charge of medical needs of the students

- Access to communication devices

_____ Field trip sponsor (name and cell number)

_____ Chaperones (list the name of all MCPS employees attending trip and their telephone number during trip)

_____ Ratio of chaperones to students _____

_____ Procedures for implementing telephone tree

- Identify local school procedures that will prepare travelers in case of a general potential emergency situation:

If this is an Overnight trip, please include the following:

○ Name of hotel/motel and telephone number: _____

○ Hotel/motel procedures that will be used in the event of an emergency: