



SA CoParents Medical & Prescription Coordination Report

Parent: Alex Rivera · Child: Ari Rivera · Date: 2026-07-31

1. Report overview

Purpose

- Confirm both parents share the same accurate medication picture.
- Identify supply, refill, or administration gaps early.
- Evaluate how medication information is shared between parents.
- Prepare for prescriber visits, pharmacy pickup, and school medication reviews.
- Develop practical options centred on your child's safety.

This report reflects the responses of one parent. It is not a diagnosis, medical advice, prescription, or determination of either parent's legal rights. Consult qualified professionals - the prescriber, pharmacist, school nurse, mediator, or attorney - for decisions that affect your child. In a medical emergency call 911 or the poison control centre.

2. Your support summary

Understanding your child's medical needs

Rating: Developing

You are still building a shared picture of your child's prescriptions.

Prescription & supply reliability

Rating: Developing

Supply is mostly reliable with some coordination gaps.

Information sharing between parents

Rating: Developing

Some updates are shared; others fall through the cracks.

Medication administration & routines

Rating: Developing

Administration is mostly consistent with some handoff gaps.

Pharmacy & professional coordination

Rating: Developing

Some pharmacy coordination is in place; still room to consolidate.

Ability to make medication decisions

Rating: Developing

Some decisions are aligned; others are difficult to resolve.

Overall

Your responses indicate that you are actively coordinating your child's medication. A written medication plan and a consistent handoff routine can help both parents support the child more effectively.

3. Your child's profile

Strengths identified

- Willingness to keep the child's medications on schedule
- Openness to talking with the prescriber and pharmacist
- Ability to grow when both homes coordinate the same routine
- Commitment to keeping rescue / emergency medication accessible

Concerns identified

- Daily maintenance medication
- Rescue / emergency medication (e.g., inhaler, EpiPen, glucagon)
- Controlled substance (e.g., stimulant, benzodiazepine, opioid)

Parent's perspective

Your primary concern is: Daily maintenance medication. You believe your child may benefit from: up-to-date school medication authorisation and shared MAR.

Additional notes

Ari uses a daily inhaler plus a stimulant for ADHD.



4. Professional involvement

Currently involved

- Paediatrician
- Psychiatrist

Upcoming or recommended meetings

Prescriber follow-up - status: Active. Suggested: Confirm both parents receive the updated prescription list after each visit..

Pharmacy coordination - status: Usually. Suggested: Consolidate to one primary pharmacy and add both parents to authorised pickup..

School medication administration - status: In place. Suggested: Ensure both parents are on the school medication authorisation and MAR distribution..

Controlled medication agreement - status: Not yet. Suggested: Ask the prescriber for a written controlled-substance agreement if applicable..

Emergency medication check - status: Only one home. Suggested: Confirm rescue medication is present, unexpired, and accessible in BOTH homes..

5. Co-parenting assessment

Information sharing

Rating: Developing

- New prescriptions
- Dose or schedule changes
- Missed doses
- Side effects observed
- Refill needs

Possible gaps: Use of rescue / emergency medication, Stopping a medication, Prescriber visits

Consistency between homes

Rating: Developing

- Same daily schedule
- Written dose log
- Handoff dose communication
- Backup supply
- Emergency medication access
- Expiration checks
- Storage location
- Adult-only administration

Decision-making

Rating: Developing

- Discuss medication concerns without dismissing one another
- Review prescriber recommendations before decisions
- Communicate directly with the prescriber and pharmacist
- Consider the child's tolerability and preference
- Consult appropriate professionals
- Reach decisions before the next refill is needed

6. Areas of alignment

- Both parents want the child to receive medication safely and on time.
- Both recognise the importance of rescue / emergency medication access.
- Both support communication with the prescriber and pharmacist.
- Both want the child to feel supported at every handoff.
- Both value the child's health and continuity of care.

7. Areas requiring attention

- The child may be carrying medication information between parents.



8. Recommended support level

Level 2 - Develop a Shared Medication Plan

Some differences or communication gaps could interrupt the child's medication.

Suggested next steps

- Create one written medication list shared with both homes.
- Consolidate to one primary pharmacy.
- Set a handoff routine that includes the last dose given.
- Confirm rescue medication is present in BOTH homes.

9. Practical options and resources

- Give both parents pharmacy authorisation and provider portal access where allowed.
- Use one shared medication calendar with dose times and handoff notes.
- Upload prescriptions, MAR, and school authorisations to a shared folder.
- Set a standard method for notifying the other parent of dose changes.
- Attend prescriber visits together, separately, or virtually - whichever is safest and most productive.
- Submit questions to the prescriber in writing before every visit.
- Confirm rescue / emergency medication is present, unexpired, and accessible in BOTH homes.
- Log every dose given so the receiving home sees the last administered time.
- Consolidate to one primary pharmacy and add both parents to pickup.
- Establish in writing how medication and copays are shared.
- Keep the child out of adult disagreements about their medication.

10. Your action plan

Priority 1: Consolidate medication list - Create one shared list with name, dose, purpose, schedule, prescriber, pharmacy · Owner: Parent · Due: ____

Priority 2: Confirm rescue meds - Ensure emergency medication is present in both homes · Owner: Parent · Due: ____

Priority 3: Share updates promptly - Send dose changes, missed doses, and side effects within 24 hours · Owner: Parent · Due: ____

Priority 4: Align on handoffs - Communicate last dose given and next dose due at every handoff · Owner: Parents · Due: ____

Priority 5: Review with prescriber - Revisit the plan at the next medication review · Owner: Parents / prescriber · Due: ____

11. Foundation statement

My child's medication needs include daily maintenance medication, rescue / emergency medication (e.g., inhaler, epipen, glucagon), controlled substance (e.g., stimulant, benzodiazepine, opioid). I believe my child needs up-to-date school medication authorisation and shared MAR to receive medication safely and on time. I am willing to share prescription information, consider prescriber recommendations, and participate in a structured decision-making process focused on my child's health.

12. Questions for the other parent or professional

- Is our current medication list fully shared and accurate in both homes?
- Do we both know when a rescue or emergency medication should be used?
- Are dose changes and missed doses being communicated within 24 hours?
- For 'Daily maintenance medication', what support should we try first?
- When will we review whether the plan is helping?

13. Final child-focused summary

Your child benefits when medication coordination is addressed early, prescriptions are shared accurately, and decisions are based on the child's health rather than parental conflict. You do not have to agree on every issue to create a dependable process for supporting your child.

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